

Three Seasons Ayurveda



Welcome to Three Seasons Ayurveda. To place an order, fill out the form below and send it to jeff@tsayuverda.com. I will review your order and contact you if there are any questions. Feel free to reach out to me if you need assistance with your order. Thank you for choosing Three Seasons Ayurveda.

Herbal Order Form

Date: _____

Practitioner

Name: _____
Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ E-Mail: _____

Ship To

Name: _____
Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____

Bill To

Name: _____
Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____

Label Information

Client Name: _____
Formula Name or Intention: _____

Dosage: Quantity of capsules, tsp., tbsp., oz. per day/times, etc.

Other Label Information:

Herbal Formula Order

Instructions: To place an order, indicate the quantity of churna (powder) or tea (cut and sift) in ounces (with a minimum of 4 oz.) or the number of capsules (in increments of 100) on the provided lines. List the corresponding herbal ingredients and their parts in the designated columns.

I offer herbal consultations if you need help creating specific herbal formulas for your clients. You can find the herbal consultation questionnaire and prices on my website, and once received, I will contact you to schedule a virtual or phone appointment.

Churna/Tea	Number of oz. (4 oz. minimum)	Amount	_____
Capsules	Number of Capsules: (made in increments of 100)	Number	_____

Ingredients- list below	Parts- list below

Herbal and Store Items

Quantity	Size	Product

Consent & Liability Release Statement

I acknowledge that Jeff Perlman and Three Seasons Ayurveda are not medical physicians, pharmacists, or nurse practitioners and cannot legally diagnose, prescribe, treat, or claim to cure diseases. Ayurveda and Herbalism are not state-licensed practices but are protected under Senate Bill 577, designating them as alternative and complementary healing practices. By signing this document, I understand that I have been advised of all risks, contradictions, and benefits of holistic treatments and release Jeff Perlman and Three Seasons Ayurveda from any responsibility.

Signature _____ Date _____