

Hypnosis Disclosure Form

Waiver of Liability

I, (the Client), agree to release _____ (the Hypnosis Practitioner), of any responsibility or injury occurring from my hypnosis session(s).

Disclaimer

THE HYPNOTHERAPIST IS NEITHER A TRAINED MENTAL HEALTH NOR A MEDICAL PRACTITIONER. At no time will your Hypnosis Practitioner attempt to provide medical or mental health therapy. You affirm that hypnosis is appropriate for you and does not conflict with existing medical or psychiatric treatment. Always seek out and follow the advice of your physician or other professional medical practitioner before considering alternative treatment.

Warranty

No warranty is given, expressed or implied, for satisfactory results from your hypnosis session(s).

Tape Recording

I agree that portions of the hypnotherapy sessions may be recorded. I agree that no compensation will be paid for any products or revenues or any other value derived from these recordings or any resulting products. I waive all rights from the use of such recordings. I do not ask for, nor expect, any compensation from any of the recordings taken during the hypnosis session.

Methods Used

The Hypnosis Practitioner employs hypnosis techniques which are designed to facilitate the client's quest for self- improvement and relaxation. Specific additional techniques may include: Body Relaxation, Directed Meditation, Age Regression, and Guided Imagery.

Training and Certification

Hypnosis Session provided by: _____.
Trained in hypnosis by the American School of Hypnosis, and certified through the American International Association of Hypnosis. www.ChooseHypnosis.com/certification.htm

(Signature of client)

(Printed name of client)