

San Antonio Hypnotherapy Center LLC

Client Consent Form

1. Fees: Our fees are \$150/session. Private office sessions are subject to discounts. Sessions routinely last 75 to 90 minutes. Payment is due in full prior to scheduling appointments. When discounts are made, refunds for unused sessions cannot be made. Credit or debit cards, cash or personal cheques are all acceptable forms of payment. A **\$50 fee** is charged for missed or last minute cancelled sessions.

2. Cancellation Policy: Appointment times are reserved exclusively for the client. Arriving promptly will insure a full session. We require a **48 hour** notice of any change or cancellation.

3. Confidentiality: All records and notes of hypnotherapy sessions are **confidential** and remain the property of San Antonio Hypnotherapy Center, LLC. No information will be released to third parties without written client authorization, except as provided by law.

4. Disclaimer: Hypnotherapy employs and teaches skills for self-improvement. In addition, it is often seen as an adjunct to allopathic medical treatment. Clients with ongoing medical conditions or mental illness are advised to first consult their primary care provider or a psychiatrist. San Antonio Hypnotherapy Center does not represent its services as a substitute form of health care and makes no health benefit claims nor does it guarantee any cures.

5. Client Consent and Release: I am of legal age, i.e., at least 18 years of age, and I consent to Hypnotherapy. Furthermore, I hereby release and discharge San Antonio Hypnotherapy Center, LLC and Dr. M. D. Witt from all claims. Further, **I acknowledge that I have visited and read the San Antonio Hypnotherapy Center website and agree with the procedures, policies, and terms therein. Likewise, I agree that to be successful in attaining my goal I accept the following tenets:** _____

1. I understand that my health depends on how well I care for myself physically and emotionally.
2. I agree to be an active participant and equal partner in my hypnotherapy process.

I declare that I have read this Client Consent form and that I fully understand and agree to the terms described above.

X _____ signature _____ date