

Information Disclosure/Liability Release Waiver

Dear Client:

At Healthy Reflections, we do not practice medicine nor do we prescribe drugs or related treatment. Hypnotherapy is a unique and separate profession as are counseling and psychotherapy. Hypnotherapy is not intended to be a replacement for medical care. It is offered here as a non-medical, non-chemical, non-invasive alternative to promote change, health and wellness. Note: Those under the care of a physician should not ignore their doctor's advice for medical problems. Consult with your physician before making any changes in his/her prescribed treatment.

Regarding Hypnotherapy:

Healthy Reflections uses different types of hypnosis to help set specific goals, give suggestions to achieve them, and overcome personal challenges. Under hypnosis you cannot be made to do anything that you do not truly desire to do, or anything that violates your moral or religious convictions. The success of this process depends on your participation and willingness to make changes. Wonderful changes can happen if you truly desire them to. There are times when one hypnotherapy session can be effective in achieving your goal. However, hypnosis is a tool and it may be unrealistic to expect lasting results in just one session. Sometimes multiple sessions may be required to achieve the desired effect. Healthy Reflections reserves the right to record sessions for our records. All client records/materials are kept in confidence. After your session(s), please take 5 or 10 minutes to relax in our waiting area. This transitional period will be helpful to you.

Regarding billing/Cancellations/Misc:

Payment is due when services are rendered. This office does not bill insurance companies for services. A \$35 returned check fee will be added to any checks returned by the bank.

Except for extreme emergencies, cancellations or appointment changes must be made at least 24 hours in advance. In signing this form, you agree to pay for any missed appointments if this 24-hour notice is not given and your appointment time cannot be filled.

Healthy Reflections reserves the right to refuse treatment to anyone at any time. Anyone under the influence of drugs or alcohol at the time of their scheduled session will be charged the full amount of the session and the session will be aborted.

I have read and understand the above information. I agree to hold harmless and for myself, my heirs or assignees, Robin Graves, d/b/a Healthy Reflections and any associates, including but not limited to landlords or hosts for any reason as a result of my participation in this program/session(s). Any relevant medical problems have been disclosed. _____

Parent/Guardian Signature (for minors)

Client's Signature Date