

Introspective Hypnosis Consent

I,, by my own free will, sign this consent and accept all risks and I am perfectly aware that Stephanie Grutter will be the person conducting the therapy sessions associated with hypnosis. **Stephanie Grutter is NOT a licensed Physician, NOR is she a licensed Psychiatrist and she CAN'T diagnose NOR treat any type of physical or mental disorders.** I fully understand that these hypnosis sessions are solely for educational and/or emotional enrichment. I also understand that any suggestions made during any session are part of a personal motivational and educational goal and it's only of informational character. **Stephanie Grutter DOES NOT pretend to be a licensed professional in Medicine or in any medical field and she is NOT a Mental Health specialist.**

With this document, I waive any claim to personal injury liability that may be the end result of any hypnosis therapy session. I also agree that Stephanie Grutter assumes **NO** responsibility for the results of this therapy process, **NOR** does she guarantee its final outcome or effectiveness.

I certify that I am a competent adult of legal age and I assume all risks and complete responsibility in the final outcome of this therapy. I am also voluntarily signing this consent form with my full legal name. This consent and acceptance of risk is effective as of today and it can't be revoked, altered, modified, annulled or invalidated, without the prior written consent of Stephanie Grutter.

Client's Full Name: **Date of birth:** ____/____/____

Home Address:

Phone: ()..... **E-Mail:**.....

CONSENT TO THE CONTENTS OF THIS DOCUMENT

By signing this document, I understand that I have carefully read and understand all the clauses of this document and I make the commitment to abide by all its clauses. My signature also means that I will have the opportunity to request clarification of any doubts that I may have about this subject and that I will be provided with answers in a satisfactory manner.

Client's Signature:.....**Date:**.....

Signature of Hypnosis Practioner:.....**Date:**.....
(Stephanie Grutter)

What exactly is Introspective Hypnosis?

It is a method that combines Ericksonian hypnosis techniques, enhanced by spirituality and the dynamics of forgiveness, in order to achieve behavioral changes, as well as to receive and resolve psychosomatic answers towards relief to the patient. This therapy can be used to treat various behaviors, such as phobias, fears, angst, sadness, anxiety, anorexia, bulimia, low self-esteem, insecurities, complexes, migraines, obesity, obsessive compulsive disorders, allergies and/or addictions.

Areas of Focus

What concerns would you like to address in your hypnosis session?

1. _____
2. _____
3. _____
4. _____