

Past Life Regression Sessions Intake Form-

When done email to me at alex@alexandrashypnotherapy.com

1) Can you enter into a hypnotic state? Have you practiced self hypnosis? Do you have any questions about what hypnosis is?

2) Have you experienced hypnosis or hypnotherapy sessions? How many? For what purpose? What was the outcome?

3) Have you experienced formal Past Life Regression sessions? How many? For what purpose? What was the outcome?

4) Have you had spontaneous Past Life recall? Describe

5) Are you a healer? In what modalities?

6) Have you met or do you know your Spirit Guides? Describe

7) What Present Life issue do you want to focus on with PLRT? What is your compelling need for a session? What issue are you now facing that is causing significant pain and requires a therapeutic resolution?

8) What are your feelings, thoughts and questions about your issue?

9) How does the issue affect you? Describe a specific moment in the last few weeks to illustrate, including what you saw, heard and felt.

10) How long has this been an issue? Has it changed over time?

11) Who are the Key People involved in your present life issues? Describe your relationship with them in this life, and the current state of relationship.

12) What information or theory do you already have about the cause and nature of your issue?

13) What outcomes would you like to get after the sessions?

14) Do you have a question you would like to have answered?

15) For Online Sessions; Do you have a) a headset with an inbuilt microphone, b) a camera that captures your face and upper body with good light, c) a solid device and wifi that's stable for 90+ minutes? These are all required.

16) Have you read the “Terms and Conditions?”

Please sign “The Disclosure” acknowledging the information below;

The Disclosure

California Business and Professions Code 2053 requires that complimentary and alternative health care providers make certain written disclosures to clients. If hypnotherapists are deemed to be covered by this provision, they must make the required disclosures:

1. A person who provides services pursuant to Section 2053.5 that are not unlawful under Section 2051 or 2052 shall, prior to providing those services, do the following:

1.Disclose to the client in a written statement using plain language the following information:

* + 1. That he or she is not a licensed physician.
    2. That the treatment is alternative or complementary to healing arts services licensed by the state.
    3. That the services to be provided are not licensed by the state.
    4. The nature of the services to be provided.
    5. The theory of treatment upon which the services are based.
    6. His or her educational, training, experience, and other qualifications regarding the services to be provided.

1. Obtain a written acknowledgment from the client stating that he or she has been provided with the information described in paragraph (1). The client shall be provided with a copy of the written acknowledgment, which shall be maintained by the person providing the service for three years.
2. The information required by subdivision (a) shall be provided in a language that the client understands.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have read and understand “The Disclosure” above.

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Signature Date