

Fee Structure, Policies and Financial Understanding
As of January, 2009

This basic fee outline may be amended any time by Dean Montalbano. Clients will be given written notice of fee or policy structure changes.

All fees are to be paid for at the time services are rendered or at the first session in the case of pre-paid packages. Payment to be made Via MO, cash or personal check. CC payments can be made with pre-arrangement.

Fee Schedule

1 session, approximately 80 Minutes, \$150.00 Per Session. (Special Until Dec 2010 \$80)

3 Session Package, \$300.00 for entire package. Approximately 80 minutes each. Must be used within 6 weeks unless Dean's schedule prohibits. (Special Until Dec 2010 \$225)

6 Session Package, \$500.00 for entire package. Approximately 80 minutes each. Must be used within 12 weeks unless Dean's schedule prohibits. (Special Until Dec 2010 \$425)

Out Calls to local professional business locations, add \$50 Per Session

Policies

Start Time- Please arrive a few minutes early. Session begins promptly. If client is late, session end time is not extended. No partial discounts.

Late Arrivals- More than 15 minutes late ~ Cancellation/ No Show.

Cancellation

No shows, or cancellations less than 6 hours in advance of start time, full fee will be due, or session will be forfeit in case of prepaid package. One exception MAY be made to this policy if there are extreme circumstances. If Dean is forced to cancel session as much advanced notice as possible will be given, and no charge will be made.

Fitness- Clients should be generally in good health for a session. If you are ill, please cancel at least 6 hours in advance.

Participation- Clients who are habitually late, do not participate or are non-responsive may be discharged. Any sessions remaining in a package will be refunded as if the previous sessions were paid for at single session price.

By signing below, I am stating that I understand and agree to these policies and fee structures.

Print Name _____

Address: _____

Phone(s) _____ Ok to leave Messages? _____

Sign and Date _____

Permission form Client Bill Of Rights

I, the Undersigned person, hereby give permission for the use of hypnosis. I understand that a hypnotist/HSR practitioner is not a Medical or Mental Health Care Practitioner and can not diagnose or "heal" anything.

I agree that I will contact my Physician for written permission for the use of hypnosis/HSR techniques for ANY situation which I am under medical care for prior to booking any sessions for it.

I agree that I will not discontinue the use of medicines or treatments which have been prescribed by my health care professional until they have told me to do so, and that I will discontinue the use of hypnosis/HSR techniques and ANY alternative practices upon the recommendation of my physician.

I understand that Hypnosis/HSR techniques represent a contract that between the hypnotist/practitioner and client and that I must participate and be interested and involved in what I am doing..

I affirm that I am over 18 years of age and I understand that the sessions may be recorded for archival purposes and that I have no claims to those recordings. THE STATE OF FLORIDA HAS NOT ADOPTED ANY EDUCATIONAL AND TRAINING STANDARDS FOR THE PRACTICE OF HYPNOTISM or HSR techniques. Under Florida State law a hypnotist may not provide a medical diagnosis or recommend discontinuance of medically prescribed treatments.

If a client desires a diagnosis or any other type of treatment from a different practitioner, the client may seek such services at any time. In the event my services are terminated by a client, the client has a right to coordinated transfer of services to another practitioner. A client has a right to refuse hypnosis services at any time. A client has a right to be free of physical, verbal or sexual abuse.

A client has a right to know the expected duration of treatment, and may assert any right without retaliation. Dean Montalbano, Cht is a certified member of the National Guild of Hypnotists, and practice in accordance with its Code of Ethics and Standards.

My Signature below is my affirmation that I understand and Agree to this Information:

Signed Date _____
Print Name _____
Print Address _____
Print Phone Number _____

Hypnosis Intake and Interview Form

Name

Address

Date of Birth:

Circle ALL that apply- Do you **ever**:

Dream, Day Dream, Sleep Walk, Sleep Talk, Space Out, Forget Where something is, Forget your dreams, Relive the past, Tell Stories, Hear a tune or smell something that takes you back in time, Have a foot fall asleep, Really get absorbed in something, Forget how you got somewhere, Smile and feel it, Find a solution in your dreams, Meditate or Use Self Hypnosis.

What do you do **REALLY WELL** in your life?

What do you **REALLY** get absorbed in?

What hobbies do you have?

What are your fears, worries and Pet Peeves?

With Whom do you have a special connection?

What do you do when you really need to "let go" and take a break?

What do you do a lot of in your day to day existence?

What do you believe about yourself?

What do you **DOUBT** about yourself?

What is your Job situation? Please Explain:

What is your current relationship situation? Please Explain:

What are things you would like to change about yourself? Why?

What is your current health situation?

What is your family Situation?

If you had to Guess- what do you think and HSRI hypnotic Trance will be like?

How do you KNOW when you can do something, even BEFORE you've actually done it?

What do you want to accomplish with hypnosis? What have you already tried to accomplish this consciously in the past?

<p>CIRCLE ONE IN EACH SECTION</p> <p>I Prefer:</p> <ul style="list-style-type: none">• <u>Options</u>• <u>Set Procedures</u> <p>When I decide to do something or Buy something I do so because it:</p> <ul style="list-style-type: none">• <u>LOOKS right</u>• <u>FEELS right</u>• <u>SOUNDS right.</u>	<p>I am here to:</p> <ul style="list-style-type: none">• <u>change some-thing I don't Like</u>• <u>Gain something I want.</u> <p>I make choices based on:</p> <ul style="list-style-type: none">• <u>MY OWN OPIN-ION FIRST</u>• <u>THE ADVICE OF OTHERS.</u>	<p>I notice always notice:</p> <ul style="list-style-type: none">• <u>EXCEPTIONS</u>• <u>SIMILARITIES</u> <p>What really matters to me is the:</p> <ul style="list-style-type: none">• <u>REASON behind things</u>• <u>MEANING behind things.</u>	<p>Spatially, I think of the PAST as being</p> <ul style="list-style-type: none">• <u>Behind me,</u>• <u>In Front of me,</u>• <u>to the LEFT,</u>• <u>to the RIGHT</u>• elsewhere_____ <p>I want to:</p> <ul style="list-style-type: none">• <u>Be told the RIGHT WAY, or</u>• <u>GIVEN LOTS OF CHOICES.</u>
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