



## Parent Approval Form

I \_\_\_\_\_ give \_\_\_\_\_, Certified Hypnotist  
approval to use hypnosis with my child \_\_\_\_\_ for the following issues

\_\_\_\_\_.

I understand that all conversations between \_\_\_\_\_ and my child are confidential and will not be shared with me without the expressed permission of my child.

I have these additional comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date