

## Hove Hypnotherapy Consent Form

Please tick as per preference below and sign to confirm your consent to be contacted by Hove Hypnotherapy for the purposes of:

appointment reminders/arrangements ☐

agreed support/relevant information between sessions ☐

evaluation of service ☐ promotional offers ☐

**I would / would not like to receive a monthly wellbeing support newsletter**

(please delete as required)

Please tick to confirm which methods you agree to be contacted by:

Text ☐ Phone ☐ Email ☐ FB Messenger ☐

WhatsApp ☐ Other (please specify) ☐ .....

**Name** ..... **Signed** .....

**Date**.....

Your privacy and confidentiality are important, and Hove Hypnotherapy will never use your information for any purpose other than that to which you have explicitly consented to above. You may withdraw consent at any time by getting in touch in writing via [info@hovehypnotherapy.co.uk](mailto:info@hovehypnotherapy.co.uk)

**I have read the Terms and Conditions for Hove Hypnotherapy and I consent to receiving therapy:**

**Name** ..... **Signed** .....

**Date**.....

