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**Release of Liability Form**

This Release of Liability (the "Release") is entered into as of **DATE** by and between **CLIENT NAME** (the "Client") and Michelle Morris Prince/A New Day Hypnotherapy (the "Hypnotherapist").

**1. Acknowledgment of Hypnotherapy Services:** The Client understands that hypnotherapy is a complementary health service and does not replace licensed medical or psychological care.

**The Client acknowledges that:**

The Hypnotherapist is not a licensed medical doctor, psychologist, or other healthcare professional unless stated otherwise. Hypnotherapy is not intended to diagnose, treat, cure, or prevent any medical or psychological condition. Results may vary, and no specific outcomes are guaranteed.

**2. Voluntary Participation:** The Client confirms that participation in hypnotherapy sessions is entirely voluntary. The Client has the right to withdraw from any session or discontinue services at any time without penalty.

**3. Release of Liability:** The Client, on behalf of themselves, their heirs, assigns, and legal representatives, hereby releases, waives, and discharges the Hypnotherapist, their agents, employees, and successors from any and all liability, claims, demands, actions, or causes of action arising out of or related to**:**

* The Client's participation in hypnotherapy sessions.
* Any perceived adverse effects resulting from hypnotherapy.

**4. Confidentiality:** The Hypnotherapist agrees to maintain confidentiality of all information disclosed during sessions, except as required by law (e.g., when there is a risk of harm to the Client or others, or as mandated by court order).

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**5. Not a Substitute for Medical Advice:** The Client understands hypnotherapy is not a substitute for professional medical, psychiatric, or psychological advice, diagnosis, or treatment. The Client agrees to consult a licensed healthcare professional for any medical or psychological concerns.

**6. Governing Law:** This Release shall be governed by and construed in accordance with the laws of the State of Oregon, without regard to its conflict of law principles.

**7. Entire Agreement:** This Release constitutes the entire agreement between the Client and the Hypnotherapist and supersedes all prior agreements, understandings, or representations, whether written or oral.

**8. Severability:** If any provision of this Release is deemed invalid or unenforceable, the remaining provisions shall remain in full force and effect.

**Acknowledgment and Consent:** By signing below, the Client acknowledges that they have read, understood, and agree to the terms outlined in this Release of Liability.

The Client affirms that they are of legal age and have the authority to enter into this agreement.

**Client Information:**

Name:
Phone:
Email:
Client Signature:
Date:

**Hypnotherapist Information:**

Name: Michelle Morris Prince
Business Name: A New Day Hypnotherapy
Phone: 503-858-4475
Email: michelle@anewdayhypnotherapy.com
Hypnotherapist Signature: *Michelle Morris Prince*
Date:

**ANewDayHypnotherapy.com**