



You May Be Wondering What to Expect

Hypnosis certainly has a fair amount of mystery surrounding it. In no small part due to entertainment and media misinformation. One of the most important jobs I have as a hypnotherapist is taking the mystery out of hypnosis for my clients, prospective clients and the general public.

What happens during each individual session is specific to the client. It isn't tailored to what the client wants or need. However, the structure of the session doesn't change for each individual.

“Before We Begin” — The Most Important Part

Before we begin the session, I will send you an intake form and a questionnaire. This is to help me get a better understanding of you and your needs so that I can tailor the session specifically to you.

Whether this is an in person session or being done by phone or video conversation, once we both get situated and comfortable, we will review your paperwork and intentions before we start the induction.

Here is a big secret of hypnotherapy: You the client are the one who is in control. As a hypnotherapist, my role is to serve as your tour guide. You decide where we go. My job is just to get you there.

The conversation we have at the very beginning of the session is where my skills get put to the test. I have to be an excellent observer, ask great questions, think on my feet and be able to explain everything to you in an easy to understand way.

Getting and sharing the right information at the start is what determines everything that happens for the rest of the session.

The Induction

Here is where the fun begins.

The induction is the process where the client is led into that very relaxed high learning state known as hypnosis.

The entire time during the induction and while you are in that very relaxed state you are going to hear everything and be aware of everything that is taking place.

You will find that being hypnotized is an extremely relaxing and pleasurable experience.

The Therapy

This is where the transformation begins. It may be where we go through the process needed to help you with pain management, weight release, becoming a non-smoker, overcoming fear of public speaking or something else.

The therapy that is done is only what you have said at the beginning of the session that you want done. You will not come in seeking to improve your job performance and walk out with the uncontrollable urge to go on a diet.

The specific approach to the change work that I do is once again 100% client driven. What your needs are determines what approach I take. Keep in mind, I'm just your tour guide as you explore your subconscious mind.

In most cases, with your permission, I provide a post hypnotic suggestion (PHS) that is a trigger to give you a tool for your use once you have left.

Quite frequently, these triggers are given to allow clients to increase their level of relaxation or confidence.

Transition to Wakeful Awareness

The final portion of the session is to simply bring you out of your hypnosis. This is a gentle, orderly process. It is not done in any hurry. I am paying close attention to you as you are coming out of the trance to see that you are coming out and if you need any additional help during this process.

Because hypnosis is so relaxing and enjoyable, it is a comfortable place to stay.

When you are wide awake, I'm there to welcome you back, check in with you and answer any questions you have.

For me, one of the most exciting and beautiful aspects of hypnotherapy is just how quickly positive change can be manifested in people's lives through this tool.

Unlike many therapeutic approaches (some of which take years), in many cases, one session of hypnosis is all that is needed to address a specific issue. Most issues are successfully addressed in fewer than four.

After The Session

After the session I suggest taking the rest of the day to relax and reflect. Give yourself some time to process everything. I will also be giving you a recording in which you will need to listen to for a minimum of 21 days at night before you go to bed. This will allow the suggestions to really engrain into your subconscious mind and help you create new positive belief systems and habits. I will do a 15 minute follow up call in 24 hours and at each week thereafter up to 28 days.

INTAKE FORM

Name: _____ Age: _____

Date of Birth: _____

Address: _____

Marital Status: Single Married

Email address: _____

Telephone: _____

Employer: _____

Occupation: _____

Emergency Contact: (Name & Number) _____

Have you had hypnosis done before? Yes No

Do you have a history of seizures? Yes No

HEALTH

Doctor's name and address:

Date of last check up: _____

Current Medications:

Medical Illnesses:

Allergies:

MENTAL HEALTH

Are you currently diagnosed with any mental illnesses? Please describe.

Have you had any suicidal/homicidal ideations? Please describe.

Do you have a problem with substance abuse? Please describe.

ABUSE HISTORY

Have you ever been a victim of physical abuse? Emotional/Mental? Sexual abuse or rape? Please describe.

FROM THE LIST BELOW CIRCLE THE AREAS THAT CONCERN YOU

Addictions	Career	Fears	Public Speaking	Self Hypnosis
Smoking	Childhood Issues	Guilt	Fertility	Speed Reading
Drinking	Concentration	Motivation	Relationships	Skin Problems
Drugs	Confidence	Memory	Relaxation	Weight Problems
Gambling	OCD	Nerves	Stress	Anorexia
Food	Depression	Pain Control	Self Esteem	Bulimia
Achieving goals	Exams	Panic Attacks	Sleep Problems	PTSD
Anxiety	Eating Problem	Phobias	Sexual Problems	Abuse

What is your main area of concern?

On a scale of 1-10, how would you rate this issue? _____

How does this issue show up in your life?

How would life look like without this issue?

What are current stressors in your life?

What are your therapy goals?

What are your favorite positive words?

What does your dream life look like?

RTT - Waiver Form

Liability

I, (The Client) _____, hereby release _____ (The hypnotist) from any liability or claims that could be made against (him/her) concerning my mental and/or physical well-being during the work that has been outlined and agreed upon (now and in the future) by filling out this form.

Scope of Practice

I understand that **Terry Carter** is not a licensed physician, psychologist, or medical practitioner of any kind and that hypnosis should not be considered a replacement for the advice and/or services, of a psychiatrist, psychologist, psychotherapist, or doctor.

Participation

I give **Terry Carter** full permission to hypnotize me and to use Rapid Transformational Therapy knowing that by participating fully in the process and by listening to my personalized recording for 21 days I play an important role in my overall success.

Guarantee

I understand that although Rapid Transformational Therapy has an incredibly high success rate, **Terry Carter (World Wellness Today)** cannot and does not guarantee results since my own personal success depends on many factors that **Terry Carter** has no control over, including my willingness and desire to affect the changes inside of myself. My payment for the session covers the time invested by the therapist. Payment is made in advance and is non-refundable.

Recording(s)

I give **Terry Carter (World Wellness Today)** full permission to make recordings that may include my image, voice. I understand that if a recording (or recordings) are made during or after my session(s). **Terry Carter** retains full copyright over any forms of media that may be produced and distributed to me.



Deepening Process

I hereby grant permission to **Terry Carter** to respectfully lift my arm, touch my shoulder, or rock my head during my Rapid Transformational session(s) in order to help facilitate the deepening process.

Confidentiality

By signing this form, I consent that **Terry Carter** may release information to a specific individual or agency if it has been determined that a child or elder is at risk of or is currently being abused; if I, as a client, am in imminent danger to myself or others; or if a subpoena of records has been requested.

I also understand that, at any time, **Terry Carter** may discuss aspects of my case with other colleagues keeping my full name and identity completely confidential always unless I have given permission otherwise. I further grant **Terry Carter** the authority to record audio, video of my sessions for purposes of accuracy and research into the human mind.

Full Name _____

Signature Adult/Guardian: _____

Date _____

Late Cancellation/ No-Show Policy

First Name: _____ Last Name: _____

Each meeting is another opportunity to help you confidently take charge and start living the life that's important to you. We understand things come up and you may need to miss your appointment. If you need to reschedule or cancel any appointments, World Wellness Today requires 48 business hours notification (Monday-Friday 8am to 5pm). Please understand that we set aside this time for you, and if you are unable to make it, we will have missed an opportunity to meet with another valuable client. This policy is in place to give the office enough time to schedule another client in that time slot. If you fail to cancel within the 48 hours prior to your appointment a \$75 fee will be charged to the card below or the credit card on file. It is your responsibility to call 281-541-4983 and speak to Mr. Terry Carter. If you cannot reach him directly by phone, please email us at UDTherapy@gmail.com.

I authorize the following payment method(s) to be used for fees incurred during the time I am a client with World Wellness Today.

I will adhere to the guidelines above to the best of my ability.

CREDIT CARD DEBIT PAYPAL VENMO

Card Number: _____

Expires: _____

CVV: _____

Printed Name: _____

Signature: _____ Date: _____

Zoom RTT Session - Terms & Conditions

Rapid Transformational Therapy is a unique method that typically requires 1 - 3 sessions to resolve most deeply-rooted issues. RTT uses hypnosis which is a completely safe, natural, and relaxing process where you will remain in control throughout the duration of your session.

During RTT you will be regressed back to several memories in order to gain an understanding and uncover where, when, how, and why you developed your presenting issue/problem. This insight will help you to gain a deeper understanding of the root, the cause, and the reason for your problem/issue.

Please understand that you play an active role in the successful outcome of your session(s). You must be motivated to change and follow through with the process. RTT is not meant to be a substitute for the advice or care of a qualified medical professional. All information presented or recommended by Terry Carter is meant for educational purposes only.

If you are unsure about whether or not you should partake in an RTT session, please consult your general practitioner first.

To protect your privacy, all client data is kept strictly confidential.

Before taking part in your RTT session(s), please ensure:

1. That you do not suffer from epilepsy.
2. That you will be free from the influence of drugs or alcohol during the course of your session.
3. That you provide me with the correct address of your online location.
4. That the environment around you is safe and will remain distraction free.
5. That you provide me with a phone number or other means of communication to contact you with in the case of a technology failure.
6. That you provide me with a third-party emergency contact number.

I confirm that I have read and accept the following Terms & Conditions.

Signature: _____ Date: _____