



FIONA BAKER
HYPNOTHERAPY

PARENTAL/GUARDIAN'S CONSENT

- I understand that, as parent/guardian of I must give consent before a child under 16 years of age (or under 17 with special needs) can receive hypnotherapy and that I or an agreed adult will also accompany the above person to their appointments.
- I have been informed by the hypnotherapist (Fiona Baker) that I must consult a doctor concerning the health and wellbeing of my charge, according to Law.
- I have asked about/seen the current DBS certificate of the hypnotherapist (Fiona Baker).
- I have read and understand the agreement and give permission for hypnotherapy treatment to take place.

Signed Date

Print Name

Hypnotherapist's Signature (witness)

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