Sláinte Solutions

Confidential Client History Form

		Date
Home Phone	Cell Phone	Work Phone
E-mail address		
Would you like to be a	dded to our email list? Yes_	NoMaybe
Address		Postal Code
City	, Provinc	ce/State
Occupation	Hobbies	
How did you hear abou	ıt us?	
Name		
Has anyone ever tried t	to hypnotize you?	
Do you believe that yo Why?	u were hypnotized?	
Generally, how did it g	o for you?	
Reason(s) you are inter	rested in hypnosis:	
	_	s issue? YesNo
(mind-body-spirit, reik	i, prayer, etc.) when appropr	riate.
Would vou consider vo	ourself a spiritual person? Ye	es No Maybe