



Terms and Conditions

These Terms and Conditions which are applicable for both Therapy and Coaching clients, have been written to ensure that clients who choose to work with me, are willing to demonstrate respect for their time, my time and the time of others awaiting appointments. By demonstrating respect for others in session before or after yourself, and arriving at the agreed start time, I can continue to maintain fees at this level and provide a parking space on the drive for my clients.

Kindly sign and date at the bottom of this document, when you have **read and understood** these terms and conditions and **agree** to work to them. If there is anything you are unclear about, please ask before signing to demonstrate consent.

This document supersedes any other electronic or paper copy of the Terms and Conditions of business for The Hitchin Hypnotherapy Practice.

If you cannot attend your booked session and have not provided adequate notice (2 days) to cancel or reschedule, thereby allowing another client to be offered your place, you will be expected to make payment in full for the session you cannot attend. If this is not made, it will not be possible to offer any further sessions.

Return of this document, signed and dated, will evidence your agreement to these Terms and Conditions.

Fees:

1. My time is charged at **£75.00 for 1 hour, £100.00 for 1 ½ hours and £130.00 for 2 hour session** and this fee includes provision of personalised Clinical Hypnotherapy recordings.
2. **Quit Smoking sessions are charged at £195.00.** This includes initial discussion about your smoking habit over the telephone, your History Taking and Assessment one-hour session, in depth Quit Smoking questionnaire, and 1.5-hour face to face therapy session incorporating Motivational Interview, Cognitive Behavioural Hypnotherapy, Aversion Therapy, NLP and Emotional Freedom Technique (Tapping). This fee includes a personalised recording of your Quit Smoking hypnosis for ongoing support. Payment must be made in advance in cash at the History Taking and Assessment session or via BACS *before* attending for the History Taking and Assessment.
3. All sessions will start and end on time.

Payment:

1. **Payment by BACS for all sessions will be made before you attend.** If you wish to pay for your sessions using cash, this must be paid during the session and in full.
SORT CODE: 30-99-88 ACCOUNT NUMBER: 00578385. MRS KAREN L KELSEY.
2. If you pay in advance for a treatment plan or individual session, and subsequently decide you do not wish to attend for therapy, you will **not** automatically be entitled to a refund.
3. If you require a receipt or an invoice for insurance purposes, please request this at your initial History Taking and Assessment session.

Cancellation and Rescheduling of Sessions:

4. 2 days' notice to cancel or reschedule your session is required. If less than 48 hours' notice is provided of the need to cancel or reschedule, **you will be required to pay in full for the planned session** as there will be no opportunity to offer the session to another client within this notice period.
5. If you forget about your appointment, diarise it incorrectly, or cannot make it at the last minute, you will be required to pay in full for the planned session, for the reason stated in 4. above.
6. Failure to pay for cancelled or rescheduled sessions with less than 2 days' notice, will mean that unfortunately no further sessions will be arranged for you.

Commitment: (please tick to the left-hand side of each of these statements, to indicate agreement)

7. I am fully committed to working with my therapist / coach in a respectful, open and honest way to achieve my wellness outcomes or personal development goals.
8. I will carry out tasks as agreed between sessions to aid my progress.
9. I give permission for my GP (and Psychiatrist if appropriate) to be contacted regarding my therapy plan and will provide his/her contact details on my Registration Form.
10. I will attend my sessions on time, mindful of other clients being treated before and after me, and their need for quiet, confidentiality and to be able to exit Little Lane in their vehicle. I will be prepared to start and finish on time, in accordance with the session times scheduled, unless mutual agreement has been reached at the start of the session to continue working longer. Extra time will be charged at the same rate – pro rata £75.00 per hour.

I have read and understood the above Terms and Conditions

Name in Full (Capitals):Date:

Signature Client:Signature Therapist:

Other Important Information:

The Practice building has blue shutters and can be found at the top left-hand side of Little Lane.

The Practice address is: **Poppyfields, Little Lane, Pirton, Hitchin, SG5 3QR**

THERE IS NO WAITING AREA and room for **one client vehicle** on the driveway at any time. As the lane is narrow, it is requested that you wait at the bottom of the lane until your appointment time, to avoid disturbing other clients who may be in session and to allow them to leave via the lane unobstructed.

THERE IS A SMALL DOG AT THE PRACTICE who you may meet when arriving and leaving; if you have any issues about having contact with the dog, please let me know in advance. With prior agreement, the dog may be used in therapy for people who find an animal's presence relaxing. It's important you are as comfortable and relaxed as possible during your visit so please let me know about your specific needs.

Registered with the following professional bodies:



The National Register of
Psychotherapists & Counsellors



Association of Professional
Hypnosis and Psychotherapy



All clients please note that I hold and process personal data for customer service, legal requirements, and accounting, in connection with my own business activity only.