

PRIVACY POLICY

All client personal information is private and confidential. This information includes, but not limited to: name, address, telephone number, email address, M.D. name, mental healthcare provider name, faxes to/from providers, D.O.B., information in client folders, information discussed within consultations and sessions, information received by telephone conversation. If a perspective client or client comes for a consultation or session, and accompanied by another adult, permission must be given by perspective client or client for other adult/family member to be present.

Client information is maintained in written files within locked filing cabinets to maintain privacy and confidentiality. No information will be shared outside of Hagerstown Hypnosis Center without client consent. An outside healthcare provider may wish for you to sign a release of information form before requested information is faxed to Hagerstown Hypnosis Center.

No information will be released—unless required by law.

Please date and sign that you have read, understand and have no questions regarding this privacy policy—thank you!

Full Name:

Date: