

Donna Kannard, PH.D.
PASSAGE- Clinical Hypnotherapy
540 N. Golden Circle Dr, Suite 210
Santa Ana, CA 92705
714-973-2131

Dear Dr. _____,

I am a professional hypnotherapist with a private practice in Santa Ana, California, and a certified member of both the American Board of Hypnotherapy and the International Association of Clinical Hypnotherapy. I hold a doctorate in clinical hypnotherapy (Ph.D-1990) from the American Institute of Hypnotherapy.

Your patient, _____, and/or parent/guardian has requested help in the area of _____ .

I do not attempt to treat or diagnose disease or mental disorders of any kind. Hypnosis in no way replaces standard medical procedures, but works in conjunction with them by freeing the patient of feelings and attitudes that may be inhibiting his or her natural immunizing or other vital processes. Hypnosis helps create strong mental expectancy and reduces stress, thereby normalizing the action of the autonomic nervous system.

Your signature below authorizes me to use hypnosis with the above-named patient for said condition.

Thank you,

Your name here

Doctor _____
(please sign and return copy in the enclosed envelope)

Patient _____

Parent/Guardian _____