

# Magnetic Money Waiver

I hereby release Denise Mortimer from any liability or claims that could be made against her concerning my mental and/or physical well-being during the work that has been outlined and agreed upon (now and in the future) by filling out this form.

## Scope of Practice

I understand that Denise Mortimer is not a licensed physician, psychologist, or medical practitioner of any kind and that hypnosis should not be considered a replacement for the advice and/or services, of a psychiatrist, psychologist, psychotherapist, or doctor.

## Participation

I give Denise Mortimer permission to hypnotize me and to use The Magnetic Money process knowing that by participating fully in the process and by listening to my personalised recording for 21 days I play an important role in my overall success.

## Guarantee

I understand that although The Magnetic Money process has an incredibly high success rate, Denise Mortimer cannot and does not guarantee results relating to income and finances, since my own personal success depends on many factors that Denise Mortimer has no control over, including my willingness and desire to affect the changes inside of myself. I understand this is NOT financial advice, it is a belief shifting process.

## Audio Recording(s)

I give Denise Mortimer permission to make audio recordings that may include my voice. I understand that if a recording (or recordings) are made during or after my session(s) Denise Mortimer retains full copyright over any forms of media that may be produced and distributed to me.

## Confidentiality

By submitting this form, I consent that Denise Mortimer may release information to a specific individual or agency if it has been determined that a child or elder is at risk of or is currently being abused; if I, as a client, am in imminent danger to myself or others; or if a subpoena of records has been requested. I also understand that, at any time, Denise Mortimer may discuss aspects of my case with other colleagues keeping my full name and identity completely confidential always unless I have given permission otherwise.

I understand that the session with Denise Mortimer may produced outstanding results and I would be willing to offer a testimonial and feedback to her for publicity purposes. I understand that my name will not be used on any testimonials unless it has been agreed with Denise Mortimer, and that the nature of my outcome might be shared anonymously with her audience. I understand that Denise Mortimer may share anonymised screenshots of comments that I share with her for publicity purposes.

I understand that I hold no rights to share this recording with anyone else, it is solely for my purposes.

I understand that by submitting this document, this waiver becomes a valid document with my full agreement to all of the above T&C

 [team.cmfc.biz01@gmail.com](mailto:team.cmfc.biz01@gmail.com) (not shared) [Switch accounts](#)



## Name

Your answer

## Date

DD MM YYYY

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