

Celia Guppy

Inspire, Motivate, Empower

Client Confidential Information

Full Name:	Address:		
Telephone: Mobile: Email:	Occupation:		
Name of GP:	Surgery name and address:		
Current Medication:	Previous Medication:		
Contacts agreed:	Yes	No	Not asked
GP			
Consultants / Psychiatrist			
Other			
By signing this contract, you are entering into an agreement for the services as agreed and detailed below: <ul style="list-style-type: none">• Cost – Private individuals £60 [per 60min session]• I understand that a cancellation without 24 hours may be charged for.• The conditions of confidentiality have been explained to me.• I have read the terms & conditions and privacy notice www.celiaguppy.co.uk			
Signature:	Date:		