



New Form Hypnotherapy

QUESTIONS FOR SMOKERS: Think carefully about your answers

1. How long have you been smoking
2. Why did you start smoking?
3. Did someone you looked up to smoke? If yes, who?
4. Have you tried to stop smoking in the past?
5. What method did you use to stop smoking and what happened?
6. How many cigarettes do you smoke a day?
7. How much do you pay for a pack of cigarettes?
8. How could you better use the money saved by being a non-smoking?

9. Can you list three reasons why you want to stop smoking?

a.

b.

c.

10. What fears might you have of quitting smoking?

11. Name other people who will appreciate your being non-smoking

12. Do you believe that smoking is harmful to you? Do you ever experience shortness of breath?

14. Do you have a smokers cough?

15. Do you have any other health problems related to smoking?

16. When do you enjoy a cigarette the most?

a. When you first get up in the morning

b. With Coffee?

c. As a reward

d. Other -

17. Do you smoke in your vehicle?

18. Do you take a break just to smoke?

19. Once you go to sleep at night, do you get up during the night to smoke?

20. Do you tend to smoke while you are talking on the telephone?

21. Do you smoke to feel confident?

22. Do you smoke more when you feel bored?

23. Do you smoke more when you are upset?

24. Do you smoke to replace overeating?

25. Do you sometimes think of your cigarettes as your friend?

26. How do you feel when you tell someone you need to have a cigarette?

27. How do you think you will feel as a non-smoker?

28. Are you ready to quit smoking?

Important! Please Read the following

Please remove contact lenses before the session. They may inhibit your ability to completely relax. Please read the statement and if you agree please sign the bottom signature section.

“I hereby authorize, Rita Trott, to hypnotize or use guided imagery with me for the purpose of becoming a non-smoker”. I understand that the results of my hypnosis/guided imagery depend greatly on my own ability to relax and the **desire to create change**. I understand that the result(s) achieved from my session(s) depends greatly on my **serious participation**. I understand that hypnosis/guided imagery is neither a medical nor a psychological procedure. I am aware and trust that Rita Trott will do everything reasonable in her power to ensure my success, but does not offer any guarantees. I understand that all sessions are completely confidential.

Date:

Signature:

I want to become a non-smoker!