



Therapist / Physician Release

Dear Doctor or Therapist,

Your client has expressed the desire to participate in a Hoffman course. We require that they discuss this choice with you. If you are not already familiar with our courses, please read our literature and call us if necessary at 800-506-5253.

We do not wish to interfere with therapeutic relationships in any way. We feel it is appropriate for you and your client together to determine the appropriateness of their participation. Our courses are experiential programs based on humanistic and transpersonal (i.e. spiritual) principles. Over the past 40 years, many therapists have recommended or allowed their clients to participate in Hoffman courses as an adjunct to the therapeutic experience. When people who are in therapy enroll in a course, we require that their therapists be informed and, in certain cases, sign this form.

In Hoffman courses, students are asked to examine the concerns of their present adult lives in light of their childhood relationships with their parents. The courses are experiential in nature, not conceptual or abstract. Therefore, students' emotions come into play as they engage in this process of self-examination. We encourage direct communication and honesty from all students. During the courses, many students find they can remember and resolve many troublesome issues they do not feel comfortable dealing with in their day-to-day lives. While this is valuable for most, it may not be appropriate for all individuals.

When your client participates in this course, it may be important to their progress for the Institute to know from you, or for you to later know from us, certain kinds of information about your client. Such an exchange may be initiated by you, or by the Institute. You and your client should discuss your mutual willingness for this to occur if deemed useful by either party.

If your client is using:

- a) a major tranquilizer (i.e. Haldol, Mellaril, etc.), please call us to discuss whether or not this program is appropriate for your client.
- b) a mood stabilizer (i.e. lithium, Tegretal, etc.), we require they take the medication as prescribed during the course.
- c) an antidepressant (i.e. Prozac, Zoloft, etc.), we recommend they continue taking it during the course.
- d) a minor tranquilizer or sedative hypnotic (i.e. Valium, Xanax, etc.), we prefer they not take it during the course.

If you believe that any of these points could pose a problem, please call us at 800-506-5253 to discuss an exception.

If you agree that (a) your client's participation in this course is appropriate at this time, (b) you will be available to them by telephone during the course, (c) you will meet with them within three working days of the course ending, and (d) you (and your client) are willing for you to exchange pertinent information with the Institute as stated above, please indicate your willingness to allow them to participate in this Hoffman course by signing below.

Therapist/Physician Signature

Date

Printed Name

Address

Phone

Client Name (please print)

Client Signature

Date