

Application To MFTI, Inc. For Hypnosis For Weight Loss

We are about to create for you a custom, *positive mental fitness*-training program that will address your particular, special needs. In order to achieve maximum effectiveness in your training, from this time forward, we must have as much accurate information about you and your situation as possible. Therefore, we ask that you be as thorough in completing this application. All of your answers are kept strictly confidential. Thank you for your cooperation.

**Adult
Application**
Ages 16 and older

Please Print or Type

Date _____
Name _____ Nickname _____
Street Address or P. O. Box _____ Apt. # _____
City _____ State _____ Zip _____
Day Time Phone () _____ Evening Phone () _____
Fax No. () _____ E-Mail Address _____
Age _____ Date Of Birth _____ Male or Female
Occupation _____ If Student, Grade or Classification _____
Name of Place of Employment or School _____
Religious Preference (optional) _____
Interests and Hobbies _____

Have you been hypnotized in the past? Yes or No • If Yes for what purpose? _____

Do you take any type of mind-altering drugs (prescription or otherwise)? Yes or No

If yes what and how often? _____

Have you ever been diagnosed as having Attention Deficit Disorder? Yes or No

Do you usually snore when you sleep? Yes or No

Are you allergic to anything? Yes or No • If Yes What? _____

How did you learn of our services? _____

EATING INVENTORY

When:

I eat when I am feeling:

Hungry:	___ Yes	___ No
Nervous:	___ Yes	___ No
Bored:	___ Yes	___ No
Stressed:	___ Yes	___ No
Hyperactive:	___ Yes	___ No
Happy:	___ Yes	___ No
Sad:	___ Yes	___ No
Lonely:	___ Yes	___ No
Frustrated:	___ Yes	___ No
Anxious:	___ Yes	___ No
Afraid:	___ Yes	___ No
Other:	___ Yes	___ No

Where:

I eat too much or snack while:

Watching TV:	___ Yes	___ No
Parties/groups:	___ Yes	___ No
Reading:	___ Yes	___ No
Coffee breaks:	___ Yes	___ No
Between home & office:	___ Yes	___ No
At sports events:	___ Yes	___ No
At business lunches:	___ Yes	___ No
In bed:	___ Yes	___ No
Other:	___ Yes	___ No

Why:

I treat myself to a snack or meal whenever I need:

Love:	___ Yes	___ No
A reward:	___ Yes	___ No
Companionship:	___ Yes	___ No
Something to do:	___ Yes	___ No
A change in activity:	___ Yes	___ No
To compensate for something unpleasant:	___ Yes	___ No
To relax:	___ Yes	___ No
To feel more important:	___ Yes	___ No
To feel secure:	___ Yes	___ No
Sexual attention:	___ Yes	___ No

Receiver And Communicator Style Questionnaire

This following assessment questionnaire will provide us with the knowledge that we need on how you receive, process, store, act upon and communicate information. This is necessary so that we will know how to phrase the wording of the suggestions that we give to you while you are in hypnosis.

There are five parts to this questionnaire. Some of the questions may appear to be the same as others, but there will always be some sleight, but important differences. Please read each question very carefully and **answer every question.**

Check One

NO.	PART ONE QUESTIONS	YES	NO
1.	Have you ever walked in your sleep during your adult life?		
2.	As a teenager, did you feel comfortable expressing your feelings to one or both of your parents?		
3.	Do you have a tendency to look directly into a person's eyes and/or move closer to them when discussing something interesting?		
4.	Do you feel that when you meet people for the first time they are uncritical of your appearance?		
5.	In a group situation with people you have just met, would you feel comfortable drawing attention to yourself by initiating a conversation?		
6.	Do you feel comfortable holding hands or hugging someone you are in a relationship with in front of other people?		
7.	When someone talks about feeling warm physically , do you begin to feel warm also?		
8.	Do you occasionally have a tendency to tune out when someone is talking to you because you are anxious to come up with your side of it, and at times not even hear what the other person said?		
9.	When asked a question that can be answered with a simple "yes" or "no" do you usually find it difficult to give an answer without also qualifying or explaining your answer?		
10.	When expressing your ideas, do you often leave sentences unfinished or "dangling" and go on to your next idea?		
11.	When expressing your ideas, do you find it important to relate all the details leading up to the subject so the other person can understand it completely?		
12.	Do you enjoy relating to and being with other people?		
13.	Are you at ease and comfortable with your body movements, even when faced with unfamiliar people and circumstances?		
14.	Do you prefer reading (or watching on TV) fiction (not real) rather than non-fiction (real)?		
15.	If you were to imagine sucking on a sour, bitter, juicy, yellow lemon, would your mouth water?		
16.	If you feel that you deserve to be complimented for something well done, would you feel comfortable if the compliment is given to you in front of other people?		
17.	Do you feel that you are a good conversationalist?		
18.	When speaking do you have a tendency to use a lot of pronouns , such as "he", "she" and "it"?		
19.	Do you have many vivid memories from your childhood?		

20.	Do you tend to lose yourself in movies, books, and/or TV shows?		
21.	Do you tend to know what people are going to say before they say it?		
22.	Do powerful visual images ever trigger a physical sensation with in you? (For example: do you feel thirsty while watching a desert scene in a movie or on TV?)		
23.	Have you ever " Zoned Out " while going somewhere and wondered how you had gotten there?		
24.	Do you ever sense when someone has entered a room before you see actually that person?		
25.	Do you like to look at cloud shapes and relate them to physical objects?		
	PART TWO QUESTIONS	YES	NO
1.	Have you ever awakened in the middle of the night and felt that you could not move or talk?		
2.	When you were a child were you more affected by the tone of your parents' voices rather than by what they actually said?		
3.	Can you usually take a hint and/or get the point of a joke quickly?		
4.	If you have been in an argument with someone, after the argument is over do you have a tendency to think about what you could have or should have said?		
5.	Do you have a tendency to give direct orders to others and to make blunt statements?		
6.	Do you sometimes desire to be complimented for a job well done, but feel embarrassed or uncomfortable when the compliment is given?		
7.	Do you often have a fear or a dread of not being able to carry on a conversation with someone you've just met?		
8.	Do you feel self-conscious when attention is drawn to your physical body or your appearance?		
9.	If you had your choice, would you rather avoid being around young children most of the time?		
10.	Do you feel that you are not relaxed or loose in your body movements when you are faced with unfamiliar people or circumstances?		
11.	Are you usually offended or upset when someone gives you a direct order to do something?		
12.	If someone describes a bitter taste do you have difficulty experiencing the physical feeling of it?		
13.	Do you generally see yourself less favorably than others see you?		
14.	Do you feel awkward or self-conscious initiating touch (holding hands, kissing, etc.) with someone you are in a relationship with in front of other people?		
15.	In a new class or lecture situation do you usually feel uncomfortable asking questions in front of the group even though you may desire further explanation?		
16.	Do you feel uneasy if someone you have just met looks directly into your eyes when talking to you, especially if the conversation is about you?		
17.	In a group situation with people you have just met, would you feel uncomfortable drawing attention to yourself by starting a conversation?		
18.	If you are in a relationship or very close to someone, do you find it difficult or embarrassing to speak of your love or affection for that person?		
19.	Do smells or odors seldom or never produce memories for you?		
20.	Do you seldom experience any emotions when looking at a beautiful sunset?		
21.	Are you often surprised by comments made by other people?		

22.	Do you consider yourself to be quiet and reserved ?		
23.	Do you have a tendency to remember your mistakes and or failures more than your successes?		
24.	When you are angry do you usually try to suppress that anger?		
25.	Do you have a low tolerance for pain?		
	PART THREE QUESTIONS	YES	NO
1.	When you put something together, do you usually read the directions first?		
2.	Wherever you are can you usually tell directions like north and south?		
3.	When looking at objects on paper, can you usually determine if they are the same no matter which way they are turned?		
4.	When others are talking, do you usually create images in your mind (mental pictures) of what they are saying?		
5.	Do you prefer reading a newspaper to hearing the news on radio?		
6.	Do you like to write letters or keep notes in a journal?		
7.	When you recall an experience do you usually see mental pictures of it?		
8.	Do you often doodle when you are on the phone or in a meeting?		
9.	Do you like reading more than listening to audiotapes or CDs?		
10.	Can you multiply and add quickly in your head?		
11.	Do you like spelling and think you are a good speller?		
12.	Do you like to write down instructions that people give to you?		
13.	Do you like to keep written records ?		
14.	Do you typically read billboards while driving?		
15.	Can you put something together easily using written directions?		
16.	If you were cooking could you follow written recipes easily?		
17.	Do you review for a test by writing summary or notes?		
18.	Do you write on napkins in a restaurant?		
19.	Do you commit a zip code or phone number to memory by writing it ?		
20.	Do you use visual images to remember names?		
21.	Do you consider yourself to be an avid reader or even a bookworm?		
22.	Do you plan the upcoming week by writing it down?		
23.	Do you prefer written directions from an employer, teacher or customer?		
24.	If you were in a strange city would you prefer to get a map and find your own way ?		
25.	Do you often think in images rather than words?		
	PART FOUR QUESTIONS	YES	NO
1.	When watching a sporting event (in person or on TV) do like to listen to the radio broadcast of the same event?		
2.	When you are alone, do you usually have music playing or do you hum or sing to yourself?		
3.	When you talk, are you likely to say things like, "I hear ya", "that sounds good" or "that rings a bell."?		
4.	Do you feel that without music, life wouldn't be as good?		
5.	Are you usually very comfortable in social groups and/or can you usually strike up a conversation with most anyone?		
6.	Do you like talking better than writing?		
7.	Is it easy for you to talk for long periods of time on the phone with your friends?		

8.	When you recall an experience, do you usually hear the sounds and talk to yourself about it?		
9.	Do you know most of the words to the songs you listen to?		
10.	Can you easily remember what people say?		
11.	Do you get very distracted if someone talks to you when the TV is on?		
12.	Do you like music better than art?		
13.	Do you prefer to have someone else read instructions or directions while you are building or assembling something or cooking?		
14.	Do you review for a test by reading notes aloud or by talking with others?		
15.	Do you talk aloud when working on math problems or crosswords?		
16.	Do you prefer listening to an audio recording over reading the same material?		
17.	Do you commit zip codes or phone numbers to memory by saying them aloud?		
18.	Do you use rhyming words to remember names?		
19.	Do you plan the upcoming week by taking it through with someone?		
20.	Do you prefer oral instruction from an employer, teacher or customer?		
21.	If you were in an unfamiliar location would you feel comfortable asking a stranger for directions?		
22.	Do you prefer talking / listening games over playing video games?		
23.	Do you keep up on the news by listening to the radio (rather than TV)?		
24.	Are you able to concentrate deeply on what another person is saying ?		
25.	Do you spend much of your free time by talking with others on the phone or in person?		
	PART FIVE QUESTIONS	YES	NO
1.	Do you like playing physical sports better than reading books?		
2.	Is your room, office, desk, car and/or house usually disorganized ?		
3.	Had you rather do something rather than watch someone else do it?		
4.	Do you think you are a good athlete ?		
5.	Do you usually say things like, "I feel, I need to get a handle on it, or get a grip"?		
6.	When you recall an experience, do you mostly remember how you felt about it?		
7.	Do you prefer to act things out rather than to write about them?		
8.	Do you usually speak slowly?		
9.	Is your handwriting usually not neat?		
10.	Do you often use your finger to point at the words when you read?		
11.	Do you learn best by doing ?		
12.	Is it hard for you to be still for a long period of time?		
13.	Do you like to build things or working with your hands ?		
14.	Do you use your sense of touch to put things together?		
15.	Can you easily distinguish items by touch in the dark or blindfolded?		
16.	If you were to take a typing course do you think that you could learn the touch system rapidly (or did you)?		
17.	Do you often move with the rhythm or beat of music?		
18.	Do you often doodle or draw on any available paper?		
19.	Are you an out-of-doors person?		
20.	Are you well coordinated in your body movements?		
21.	Do you spend a large amount of your leisure time on crafts, handiwork or physically building things?		

22.	Do you like to feel the texture of things?		
23.	Do you prefer physical games to video games?		
24.	Do you find it fairly easy to keep physically fit?		
25.	Do you use your free time for physical activities such as sports or exercise?		

I, (**print name**) _____do hereby make application to MFTI, Inc. doing business as Your Mental Gym to receive Positive Mental Fitness Training for the purpose of changing my body weight, shape and size and improving certain other areas of my life that I have listed and/or indicated on page 2 of this application.

I am aware that hypnosis for non-medical and non-health care purposes may be used in this training. I acknowledge that this is not a medical procedure and that no diagnosis or treatment of any healthcare condition will be done. I further acknowledge that the procedures and cost of this training have been explained to me to my satisfaction and that no expressed or implied warranties or guarantees are being made in regard to the outcome of this training.

I take full responsibility for all of my actions and I agree to hold harmless Jack D. Rhodes and MFTI, Inc.

Applicant's Signature _____ **Date** _____

Accepted for MFTI, Inc By _____ **Date** _____

When you have completed this application and signed it you may fax it back to (405) 440-2311.

If time permits you can mail it to

MFTI, Inc.

5909 N.W. Expressway, Suite 221,

Oklahoma City 73132

or bring it with you when you come in for your first session.

The MFTI, Inc. office is located in suite 221 of the Weokie Credit Union Office Building at 5909 North West Expressway in Oklahoma City. That is near the intersection of MacArthur and N.W. Expressway.

If coming from the south take Interstate 35 into Oklahoma City to the junction with Interstate 40 west (toward Amarillo). Go west on I-40. Exit onto I-44 east toward Tulsa. You will actually be going north on I-44, but the designation is east.

Move into the center lane and stay there for a little while. After a couple of miles I-44 will split off to your right. By staying in the center lane you will then be on the Lake Hefner Parkway.

After the I-44 split you can move over into the extreme right lane and look for the N.W. Expressway exit. Take that exit ramp and stay in the left lane. It's up a rather steep grade. At the top of that hill, at the signal light, take a left. You are then on N.W. Expressway about 2.5 miles from my office building.

If you are coming in from the southwest on I-44, after you pass under I-40 move into the center lane and stay there for a little while. After a couple of miles or so, I-44 will split off to your right. By staying in the center lane you will then be on Lake Hefner Parkway.

After the I-44 split you can move over into the extreme right lane and look for the N.W. Expressway exit. Take that exit ramp and stay in the left lane. It's up a rather steep grade. At the top of that hill, at the signal light, take a left. You are then on N.W. Expressway about 2.5 miles from my office building.

The entrance to the Weokie Credit Union Office building will be on your right, just beyond the intersection of N.W. Expressway and MacArthur. It is just passed a drive in restaurant called the Charcoal Oven.

If the parking lot in front of the building is full there is plenty of parking in the rear. If you park in the rear enter the building through the tunnel and take the first entrance. The elevator is just inside.

Call me when you get to the building (405) 397-6690) and I will meet you in 2nd floor lobby, just inside the glass doors.