

STATEMENT FOR UNDERSTANDING AND CONSENT FOR TREATMENT

I understand that my participation in individual or couples therapy is voluntary. I may as the client terminate the therapeutic relationship at any time and will discuss my reasons for doing so with Martina G. Barnes, MS, LPC.

I understand that all information shared is held in strict confidence and is only released by my written permission to specific persons or institutions for specific reasons. I further understand that there are some exceptions to confidentiality, which are mandated by state and federal statute.

If I am the financially responsible party paying for all or a part of the charges for psychotherapy, I agree to pay for services at the time rendered or to discuss other specific payment arrangements with Martina G. Barnes, MS and to pay, in good faith, any charges accrued by me or my family members.

I have read and understand "Office Policies and Information", "Professional Disclosure Statement", and "Your Rights as a Counseling/Therapy Client under HIPAA."

I have received a copy of any or all of these documents if requested. I understand that I may address any concerns or grievances with my therapist. I also understand that I may contact the licensing board, which regulates my therapist's professional practice, if I have concerns about my treatment that I have shared with my therapist but have not been addressed by my therapist.

I have fully discussed with Martina B. Barnes, MS, LPC the various aspects of the psychotherapy contract.

My signature on this document indicates my authorization and consent to receive outpatient diagnostic and treatment services from Martina G. Barnes, MS, LPC.

Signature of Client

Date

If more than one individual (e.g. couple) is seeking therapy, please have the other person sign below. Their signature indicates they have also read the "Office Policies and Information and the "Professional Disclosure Statement and Consent for Treatment Additional copies of these will be provided upon request.

Signature of Client #2

Date