



Explanation of Services and Informed Consent

- Therapy is about you. Your therapist will encourage you to talk about whatever is on your mind. We will ask questions and share insights, but for the most part we will not tell you what to do.
- Your therapist will attempt to respond to your voicemails and texts/emails as soon as possible. If you are in crisis and it is outside of business hours or you cannot reach your therapist, or if you are in danger of hurting yourself or someone else, call 911 immediately.
- Email is not a secure way to communicate. Please keep this in mind and use email for appointment setting or other non-confidential information.
- The fee per 45 minute session is \$100 for individuals or \$120 for couples/family therapy. Payment is expected at time of service. We accept cash, check, and credit card. If you would like a receipt emailed to you, please let your therapist know.
- We are an out-of-network provider, and do not accept insurance. We are happy to provide you with paperwork which you can submit to your insurance carrier reimbursement.
- Like most healthcare providers, **we require a 24 hour notice for appointment cancellation. The fee is the cost of the full session.** Your therapist has reserved your appointment time for you. If you do not give sufficient notice, your therapist cannot fill your spot.
- Expect your session to begin and end on time. This may seem awkward, but it allows your therapist to complete needed documentation and keep their schedule running smoothly. If for any reason your session is started late, you will still be allowed your full session time.
- If you are more than 20 minutes late and do not contact our office, your appointment may be considered a no-show and you will be charged the full session amount. The office may be closed after this time. Your therapist will attempt to contact you by phone if this is the case.
- New Wings Counseling takes your confidentiality very seriously. As stated by law, your confidentiality is guaranteed with a few exceptions: if you say or write that you are going to harm yourself or someone else, if it is suspected you are abusing or harming child, or if your insurance company is paying for your treatment your therapist may be obligated to discuss your goals and treatment progress.
- If you are a child or adolescent, your therapist will discuss the role of your parent or guardian has in your treatment and how confidentiality works in child or family therapy.
- If you have any questions regarding this form or your treatment, please bring it to our attention.

Please sign and date to indicate you have read and agree to these terms.

Signature

Date

Printed Name

