

Talk Therapy With Laurie

1604 Westgate Circle, Brentwood TN 37027 • 2621 Gallatin Pike, Nashville TN 37211

Phone 615-332-4357 • TalkTherapyWithLaurie@gmail.com • TalkTherapyWithLaurie.com

Legal Name: _____ Date of Birth: _____

Preferred Name: _____ Age: _____

Parent or Guardian Name (if under 18): _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Preferred Method of Contact: _____ Okay to Leave Message? _____

Where did you hear about Talk Therapy With Laurie? _____

Gender: _____ Marital Status: _____

Children Names and Ages: _____

Emergency Contact Name: _____ Phone: _____

Relationship: _____

Highest Level of Education (please circle):

Some High School / High School / Associates Degree / Bachelor's Degree / Master's Degree / Doctorate

Name of Employer or School: _____

Occupation or Year in School: _____

Religious Affiliation: _____ Level of Importance? _____

Substance Use (please circle and explain):

Tobacco: Past User / Moderate User / Frequent User: _____

Alcohol: Past User / Moderate User / Frequent User: _____

Other: Past User / Moderate User / Frequent User: _____

Health History

Is there a history of family abuse, neglect, mental illness, or suicide? _____

Current Medications and Supplements: _____

Medical Problems or Disabilities: _____

Hospitalizations: _____

Have You Received Counseling in the Past? _____

Why are you seeking counseling? _____

Payment Policy:

I currently do not accept insurance. Payments must be made prior to your appointment via PayPal (@talktherapywithlaurie), Venmo (@Laurie-Baldwin-1975), Cash App (\$TalkTherapyWLaurie) or the Thera-LINK HIPAA compliant tele-health portal (by credit card or HSA/FSA card).

Cancellation Policy:

When you book an appointment, I am holding a space that is no longer available to other clients. If you need to cancel, please let me know as soon as possible. Appointments are in high demand and your advanced notice will allow another client access to that appointment time. In order to be respectful of everybody's time, please reschedule or cancel appointments at least 24-hours prior to your scheduled appointment. I have reserved this time for you and charge the full fee for cancellations not made 24-hours in advance.

Informed Consent:

Everything we discuss in therapy will remain confidential with the exception of 3 limitations:

1. You reveal plans to commit suicide.
2. You reveal plans to harm yourself or another person.
3. You report abuse of any vulnerable person such as children, the elderly, or the disabled.

I am obligated to report these cases to the various appropriate authorities.

- For your privacy, if we see each other in public I will not acknowledge you, but you can choose to engage me if you are comfortable doing so.
- While it is unlikely that security could be breached, be aware that all written documentation (patient records, emails and texts) are kept in secure, locked devices.
- Psychotherapy offers no guarantee of success and there are both benefits and risks associated with any treatment plan. Together we will create an individualized treatment plan, which I invite you to discuss with me at any time, and we will assess, review, and modify the plan as your needs change and therapy progresses.
- I have provided you with an overview of Talk Therapy With Laurie office policies and procedures so that you understand what is required of you and my professional responsibilities to you. Signing this agreement constitutes your agreement with the above policies and informed consent for therapeutic treatment.
- I am currently under the supervision of Gayden Fite, LPC- MHSP, LIDCD.

Client Signature

Date