



Carrie Ball
ACC Dip PBC, VCA, Cert Pet
Bereavement BC

Newtons of Bury
151 The Rock
Bury
Greater Manchester
BL9 0ND

Counselling Contract Form

This contract is between Carrie Ball, Pet Bereavement Counsellor and _____ Client

Dated: _____

Client's Address: _____

Postcode: _____

Phone Number(s): _____

Email: _____

GP / Surgery: _____

The Counsellor

I am a qualified Level 2 Veterinary Care Assistant (2012) and Qualified Pet Bereavement Counsellor. I completed the Companion Animal Bereavement Counselling Diploma in 2001 and then the Level 3 Certificate in Pet Bereavement.

I am here to support you whether you are facing losing a companion or have lost a companion already. I use my years of experience as a Veterinary Care Assistant to help you.

Confidentiality and Records

The content of the sessions is confidential to you and me. Your information and session details will be held securely.

If I believe you will cause serious physical harm to yourself or another person then I will not be able to retain confidentiality and will need to inform your doctor. If required by a Legal Representative such as Po

Sessions and Fees

Sessions will be for 60 minutes (Except E mail)
The fee for your session will be dependent on the session type.
Phone sessions are £30
E mail is £20 for up to two e mails, within 24-48 hrs
Zoom consults are £35.

This contract means that you have agreed to pay for the counselling. Payment must be made at least 24 hrs before the session.

Payment may be made via Bank Transfer or PayPal.

Bank details are: 03710009 20-10-71

PayPal is carrie@pbsndirectory.com

Cancellation

I require at least **24 hours'** notice if you wish to cancel a session. If less than 24 hours' notice of cancellation is given by you (unless in an emergency) the full fee will be payable at the next session

In the event of my not being able to give you your session because I am unwell, I will give you as much notice as possible and offer you an alternative time.

PLEASE READ THIS CONTRACT CAREFULLY

This agreement is fully understood and agreed to and is signed as it stands by:

Name: _____ Client

Name: _____ Carrie Ball _____ Pet Bereavement

Counsellor Carrie Ball

Date: _____

The following is a series of questions that I would like you to answer as honestly as possible. This enables me to tailor my support and advice to suit you personally.

The more information I have prior, the more I can help you. Many thanks for taking the time to complete this. Some questions may be hard to answer, and some may seem irrelevant, however the answers will enable me to help you in any way i can.

Name:

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Date of birth:

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Marital status:

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Name of pet:

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Type of pet:

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Length of time pet has been with you:

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Age of pet:

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Please briefly answer the following questions.

How did you acquire this pet?

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Reason for loss of pet:

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What feelings or experiences are you struggling with the most?

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Thank you for taking the time to complete these forms. The answers provided will help me to help you.

Thank you for choosing my service.