

I am willingly entering into a counseling relationship with the understanding of the following conditions:

1. I understand that my counseling records are kept confidential, except where disclosure is required by law (e.g., child abuse/elder abuse reporting requirements, serious threat of harm to self or others) or I have signed the appropriate release of information forms.
2. Additional limits to confidentiality include:
  - In the case of minors, parents or legal guardians have access to their child's records, unless emancipated.
  - Family or group counseling is not legally private and can be subpoenaed.
  - Provisionally-licensed therapists are required to discuss their cases with their supervisor, who is equally bound to protect client confidentiality.
  - Therapists may, upon occasion, discuss their cases anonymously with peer professionals for the sole purpose of improving the quality of services provided to the related client.
3. Counseling will cover emotional, physical and spiritual aspects of my life and may sometimes be distressing and difficult. However, I understand working through my issues will enable me to achieve increased health both personally and relationally.
4. I have the right to ask questions pertaining to my treatment and may discontinue therapy at any time. I understand that terminating counseling is best decided after consulting with my therapist.
5. I understand that *Easy Life Coaching, LLC.* does not accept insurance for partial or full payment of services rendered. I agree to pay \$50.00 per session, payment to be made in advance on a monthly basis unless otherwise agreed upon.
6. Barring emergencies, I understand I must cancel and/or reschedule my appointments by notifying *Easy Life Coaching, LLC.* prior to the scheduled appointment hour. In the evening and on weekends, a message may be left via text, voicemail or email.

7. In consideration of the benefits to be derived from the counseling, the receipt whereof is hereby acknowledged, I hereby release, remise and forever discharge and covenant not to sue or hold legally liable *Easy Life Coaching, LLC.* from any and all claims, demands, actions or causes of action of whatsoever kind and nature related to the counseling process.

*I have read and understand the preceding information and agree to the policies of Easy Life Coaching, LLC. as stated. I understand that these comments are prerequisite to my receiving and continuing counseling through Easy Life Coaching, LLC.*

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Client Signature

Date

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Therapist Signature

Date