Richelle Jacobs, LMFT
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Email Correspondence Informed Consent Form

I _____, and I, _____hereby consent to engaging in email correspondence with Richelle Jacobs, LMFT, as part of our psychotherapy.

We understand that we have the following rights with respect to email correspondence:

(1) We have the right to withhold or withdraw consent at any time without affecting our rights to future care or treatment.

(2) The laws that protect the confidentiality of our personal information also apply to email correspondence. As such, we understand that the information disclosed by either of us during the course of our therapy is generally confidential. However, there are both mandatory and permissive exceptions to confidentiality, including, but not limited to reporting child, elder, and dependent adult abuse; expressed threats of violence towards an ascertainable victim; where either of us makes our mental or emotional state an issue in a legal proceeding; and if Homeland Security requires our psychotherapist to release information about us.

(3) We understand that there are risks and consequences from email, including, but not limited to, the possibility-- despite reasonable efforts on the part of our psychotherapist—that the exchange of personal information could be disrupted or distorted by technical failures; that the transmission of our personal information could be intercepted by unauthorized persons; and/or that the electronic storage of our personal information could be accessed by unauthorized persons.

(4) In addition, we understand that email-based services and care may not be as complete as face-to-face services. We also understand that if our psychotherapist believes we would be better served by another form of psychotherapeutic services (e.g. face-to-face services) we will be referred to a psychotherapist who can provide such services in our area.

We have read and understand the information provided above.

_____   _____
Client Signature   Client Signature

_____   _____
Client email address   Client email address

_____   _____
Date   Date