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Psychotherapy Agreement

Welcome to My Practice

Welcome to my practice. I am deeply grateful for your trust in deciding to work with me and look forward to our journey together. This document outlines important information about my professional services and business policies. Please review it carefully and bring any questions or concerns to our next session so we can discuss them together.

Psychotherapy involves various approaches to address the life experiences or challenges that have led you to seek treatment. Many benefits can be achieved through this process, including personal growth, improved relationships, reduced distress, and resolution of specific psychological difficulties.

Therapy often involves exploring your life experiences in depth, which may bring up uncomfortable emotions such as sadness, anxiety, confusion, discomfort, or anger. This process may also challenge your existing beliefs about yourself and the world. However, it has been shown to be most effective when you enter willingly, are committed to personal growth, and are open to change.

Therapy is a collaborative journey which requires a shared commitment and active partnership between us to be truly effective. Your dedication to fully engage in the process, remain open to new experiences, and explore unfamiliar experiences and aspects of yourself is essential for meaningful growth and progress. My goal is to provide a safe and supportive environment, and I encourage open communication about your experience, including any concerns, dislikes, or disappointments, so we can address and work with them together.

Because the way therapy concludes can significantly impact its long-term benefits, I ask that you notify me of any plans to end therapy. Ideally, I request a minimum of four weeks' notice to allow us time to process this transition thoughtfully.

Services and Fees

My fee per 50-minute session is \$250 for individuals and \$270 for couples and families. Payment is due at the time of service. Additional professional services, such as reports or phone calls over 10 minutes will be billed on a prorated basis at my hourly rate.

After our initial session, we will establish a tentative schedule for future sessions. Typically, sessions occur either weekly or twice a week at a set time of the week. The frequency of our meetings may vary at different points in our work together, depending on your needs at a given time. Sessions are 50 minutes unless otherwise scheduled.

I accept Zelle, Venmo (@Therese-Allen), personal checks, and cash for payment. A \$40 fee will be charged for any check returned for insufficient funds if I am unable to reverse the fee with my bank. My hourly rate may increase annually by no more than \$15 per session. If you are paying a reduced fee due to financial hardship and your financial circumstances change, we may discuss an adjustment to your rate. Please inform me promptly if you experience any financial concerns.

Unpaid balances exceeding 30 days may be sent to a collections agency. By signing this agreement, you consent to the disclosure of your name, contact information, and the amount owed for collections purposes, if necessary. I will provide a minimum of two notices before proceeding with collections.

Cancellation Policy:

You are responsible for payment for any scheduled session unless you cancel with at least 48 hours' notice. Clients are allowed to cancel up to six sessions per calendar year without charge, provided that cancellations occur at least 48 hours in advance. This policy does not apply to holidays or time off taken by me. Any cancellations beyond the six-session allowance or cancellations made with less than 48 hours' notice will be charged at the full session rate.

Confidentiality

Confidentiality is a cornerstone of our work together. I am legally and ethically bound to protect your privacy, with certain exceptions as outlined below:

- **Harm to Self or Others:**
Therapists are required to break confidentiality if a client is at imminent risk of harming themselves (suicidal intent) or others (homicidal threats).
- **Abuse or Neglect of Vulnerable Populations:**
Therapists must report suspected abuse, neglect, or exploitation of:
 - Children (individuals under 18 years old).
 - Elders (usually defined as individuals 65 or older, depending on jurisdiction).
 - Dependent adults (individuals with physical or mental limitations that restrict their ability to care for themselves).
- **Court Orders:**
A court can order a therapist to release confidential information as part of legal proceedings. However, the therapist can invoke client-therapist privilege unless the court explicitly overrules it.
- **Child Sexual Exploitation Materials (CSAM):**
If a therapist becomes aware that a client is viewing, creating, or distributing CSAM, they are generally required to report it. This is increasingly codified into law in many jurisdictions.

- **Grave Bodily Harm or Threats to Others (Tarasoff Duty):**
If a client makes a credible threat of serious violence toward an identifiable person, therapists are required to warn both the intended victim(s) and law enforcement ("duty to warn").

In such cases, I will make every effort to inform you of any necessary disclosures as soon as possible.

Additionally, as outlined in the Services and Fees section, I may disclose information about unpaid balances to a collections agency after multiple notifications.

Contacting Me

You may contact me by phone or text. I will make every effort to return calls within 24 hours. You may text for logistical matters, such as rescheduling or notifying me if you are running late.

If you are experiencing a crisis that requires immediate attention, please call 911 or go to the nearest emergency room to speak with a mental health clinician.

Acknowledgment of Terms

I have read and understand this document and agree to its terms as part of our professional relationship.

Full Name: _____

Client Signature: _____ **Date:** _____