



## CONSENT FORM

### IMPAKT Mentoring Participation Consent

IMPAKT Mentoring includes culturally grounded mentoring, emotional release practices, Dyrri Dyrri Healing, and other wellbeing supports. It is a non-clinical service designed to provide guidance, emotional support and personal development.

By signing below, I acknowledge and agree to the following:

- I understand that IMPAKT Mentoring is not counselling, psychology, or clinical mental health treatment.
- I understand that participation is voluntary and I may withdraw at any time.
- I agree to participate respectfully and engage in sessions to the best of my ability.
- I acknowledge that my mentor may refer me to additional supports if required for my safety or wellbeing.
- I understand confidentiality will be maintained except where safety or legal obligations require otherwise.
- I consent to participate in mentoring sessions delivered by IMPAKT Mentoring staff and practitioners.

**Participant Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent/Guardian Signature (if under 18):** \_\_\_\_\_

**Date:** \_\_\_\_\_

