

Email and Text Messaging Agreement

Root to Rise Therapy LLC values communication between therapists and clients.

We appreciate having the ability to communicate with you by email or text messaging as this is often the most convenient method for both therapists and clients. However, it is possible that email and text messaging security can be compromised, and it is beyond the control of Root to Rise Therapy LLC to maintain the security of communications beyond using routine internet safety practices and safeguards.

By signing below and providing your email and/or phone number you acknowledge this risk and give your permission to communicate with us via email and/or text messaging.

By signing below, you also acknowledge that this policy extends to caregivers and other professionals with which you have given us permission to communicate.

Name: _____ **Date of Birth:** _____

_____ I wish to receive email communications.

_____ I wish to receive text messages (appointment reminders, answer questions, etc.)

Email(s): _____

Phone Number: _____

_____ I DO NOT wish to receive email communications.

_____ I DO NOT wish to receive text messages.

Signature Client: _____ **Date Signed:** _____