



Ezreena's Therapeutic Counselling Inc.

Ezreena Draper Scott

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250.212.5596

STATEMENT OF UNDERSTANDING

Counselling is a partnership between therapist and client. This collaborative process will involve: my commitment to help: clarify the problem(s) that brought you to counselling, develop a plan to address them and work to resolve the issues that are keeping you stuck.

Your commitment to this process is: to arrive on time and if you cannot make a session to notify me in advance.

CONFIDENTIALITY & CLIENT RIGHTS

1. All counselling services and records are confidential. No information will be provided to anyone other than yourself, unless I have your signed consent. Please note that any form of electronic communication (emails, text messages, social media, etc.) can be a security risk and you signing this form is expressed consent to the use of this transmission, including internet and cell phone sessions.
2. There are some important exclusions to the above:
 - A. I sometimes debrief &/or consult with other professionals in the field; we are all bound by the oath of confidentiality.
 - B. I am legally obligated to report:
 - I. Child and/or elder abuse and/or neglect
 - II. Immediate danger /threat to self or others, and/or medical emergency
 - III. Subpoena or court order

CONSENT TO COUNSELLING

Payment for counselling services is required at the end of each session. I accept cash / cheque / e-transfer.

Internet &/or phone sessions: payment is required **before** the start of your appointment.

(If there is no notice of re-scheduling, or last minute cancellation, the pre-paid session will cover the scheduled session time.)

Any requests made outside of session time (letters, emails to read etc.) will be billed at the hourly rate, in 15 minute increments.

Part of the counselling process may include (with your permission) body processes and energy work to unlock dynamically what is keeping you stuck. Signing this form gives me consent to perform these processes.

Please note.... I use the last 5 minutes for payment and scheduling. Please refrain from extending the session beyond the allotted time, as that will affect other clients and my time to prepare for my next client.

You consent: "I agree to pay, in full, for sessions that I miss, cancel last minute or do not give minimum 24 hour notice, as well as multiple re-scheduling". Unpaid bills will be forwarded to a collection agency.

All counselling services with Ezreena, including out of province and out of country sessions, are governed by the laws and regulations of British Columbia, Canada.

I have read the above, understand its contents and consent to this counselling process.

Client name

Date

Client Signature(s)

Therapist signature

____ Copy accepted / declined by client

___x___ Copy kept by therapist

Legal case? _____