Brindley Group, LLC

Professional Counseling and Consulting

COUNSELING CONSENT

Welcome to the Brindley Group. The Brindley group is a private, professional counseling and consulting group whose primary purpose is to enhance quality of life and strengthen individuals and families. It is our primary responsibility to respect the dignity and promote the welfare of those we serve. Therefore, this form serves to explain our purpose, services and limitations. If you choose to participate in counseling, we must have your signed permission. Please be aware that participation in counseling is voluntary and you have the right to decline.

Our primary **purpose i**s to provide professional counseling for individuals and families. As you begin counseling here at the Brindley Group, we want you to know that we are committed to providing the highest quality of professional counseling **service** for individuals and families regardless of race, gender, religion, ability, or ethnic/national origin. We do ask that you contact us no later than noon the day before your appointment if you are unable to keep your appointment.

An essential aspect of counseling is **confidentiality**. The things discussed in counseling sessions are private and confidential and we are ethically bound to protect your right to privacy. There are, however, a few circumstances when information may be disclosed, as mandated by law. The first is when there is a threat of harm to self or others. The second is when there is some indication that child abuse may have occurred. The third is when the disclosure is court ordered. The fourth is when you give your permission to release information to another party. In addition, your information is available in the event of an emergency for intergroup communication (consultation). Lastly, if you wish for us to file your insurance, we must provide diagnostic impressions to your insurance provider and by signing this consent you are providing us with your permission to provide that information for billing purposes.

It is our goal in counseling to help you achieve positive results. Positive results take time and can not be guaranteed. Counseling requires your effort in remaining committed to the counseling process. If you do not attend scheduled sessions and are not participating in recommended/routine sessions, you are no longer active and under our care.

I understand the information provided above, and I freely give my consent to receive counseling services as offered and provided by the Brindley Group. I also understand that I may withdraw my consent at any time by written request, effective at the time and date received by the Brindley Group.

_____ _____ _____/_____/_____

Print Name Signature Date

_____ _____/_____/_____

Witness Date