I am a Licensed Mental Health Counselor in the state of New Hampshire (LICENSE #671). I received my Masters of Science in Mental Health Counseling from the University of Vermont in Burlington.

YOUR RIGHTS AS A CLIENT

You are entitled to receive information from your therapist about the methods of therapy, the techniques used, the duration of your therapy, and the fee structure. You can seek a second opinion from another therapist or terminate therapy at any time. Sexual intimacy is never appropriate in a professional relationship and should be reported to the board that licenses, registers, or certifies the licensee, registrant or certificate holder. If you think any therapist has violated your rights or caused you harm, you may contact the Board of Mental Health for the state of New Hampshire.

CONFIDENTIALITY

Generally speaking, the information provided by and to the client during therapy sessions is legally confidential and cannot be released without the client's consent. However, there are some exceptions to this confidentiality. As a licensed mental health professional, I am mandated to disclose information if a client is planning a suicide attempt, is a danger to others, or if child abuse or maltreatment is suspected. The client will be informed prior to any mandated disclosures.

CANCELLATION POLICY

I have a 24-hour cancellation policy that applies to all scheduled appointments. If you are unable to attend a scheduled session and do not notify me with at least 24 hours notice, you will be charged a \$75 fee.

EMERGENCIES

This office provides non-emergency services only. For scheduling and other logistical issues, I am reachable by email at https://ncernytherapy@gmail.com. If I am unavailable due to vacation, a qualified back-up therapist will be available to you.

VERIFICATION I have read the preceding information and I understand my rights as a client or as the client's responsible party.

Patient's printed nai	me:		
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Patient's signature:		 	