

## **AGREEMENT FORM COUNSELING SERVICES**

**Welcome** to counseling services. Please read the following information carefully and if you have any questions please discuss them with your counselor.

**Services:** Luann Sandahl has a Master's Degree in Counseling and is a Licensed Professional Counselor with the State of Texas. She provides brief therapy for depression and anxiety, relationship therapy, grief therapy, couple's counseling, and parenting training.

Services offered include individual, couple, and group therapy. These services include counseling, assessment, and referral to enhance your mental health and overall wellness.

Fees for these services are due and payable at the time of receipt. Individual therapy is \$80 per session, Couple Counseling is \$110 per session, and Group Therapy is \$30 per person per group.

If you need to cancel a scheduled appointment, please give 24 hours notice to avoid a \$20 cancellation charge.

Returned checks will incur an additional \$30 charge to your next session.

**Sessions:** The first session is an "intake" and will consist of some time spent filling out and discussing an intake form. Discussion of the form and information you share will facilitate an understanding of how counseling can benefit you. At the end of the intake session you and the counselor will arrive at a plan to best meet your needs. This plan will consider whether this counselor is most beneficial for you to continue with or whether some other professional might be more appropriate. It is possible you will be referred to another professional or agency for assistance. By signing this agreement you are authorizing the exchange of information between Luann Sandahl and any professional or agency to which you agree to be referred.

If you continue with the intake counselor, it is likely you will be provided short term counseling services. In that case, you will probably meet once a week for 50 minutes for a period of one to twelve weeks, depending on outcome. You might be referred to group therapy where those sessions last 60-90 minutes once a week. Should you need longer term counseling services you and the counselor will discuss options that may or may not include the intake counselor.

**Process:** Counseling is a learning process and usually concerns itself with everyday problems and issues. The client and the counselor both have responsibilities. The counselor is responsible for listening in a caring manner, sharing her experience and education as they apply to the situation at hand, and helping construct outside activities, including assessments that might be helpful. The client is responsible for fully disclosing information about the issues being discussed and for completing outside activities that it

is agreed will be helpful. Counseling focuses on one concern at a time and multiple concerns can be prioritized. Both parties recognize that counseling is voluntary and confidential. Confidentiality will be broken, however, if the counselor is made aware of an intent to harm oneself or another, or in the case of abuse.

**Emergencies:** In the event of an emergency please call 911. Also be aware that Shoal Creek Hospital and Central Texas Medical Center in San Marcos are open 24 hours a day and can do an emergency assessment. **The counseling service you are utilizing with Luann Sandahl is not on 24 hour call. All messages will be picked up and calls returned during regular business hours. Email is not confidential and will not be utilized for counseling other than exchanging details about completing assessments online.**

The parties agree that they shall submit any dispute to mediation as described in Section 154.023 of the Texas Civil Practice and Remedies Code, or a moderated settlement conference as described in Section 154.025 of the Texas Civil Practice and Remedies Code.

*Complaints can be made to: Texas State Board of Examiners of Professional Counselors  
1100 West 49<sup>th</sup> Street  
Austin, Texas 78756  
Phone: (512) 834-6658 Fax: (512) 834-6789 E-mail [lpc@tdh.state.tx.us](mailto:lpc@tdh.state.tx.us)*

I have read both pages of this agreement and fully understand each section of this form and agree to participate in counseling services with Luann Sandahl under the provisions, guidelines, and limits delineated above.

---

Signature of client(s)

---

Date