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Relationship
Coaching & Psychotherapy
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Relationship Coaching & Psychotherapy Agreement

* Client will address concerns or questions about this agreement with Therapist before signing *

1. Client understands and agrees that they are fully responsible for their physical, mental and emotional well being during this professional relationship, including the Client's choices and decisions.
2. Client understands that coaching and psychotherapy is a joint effort in which the Client and Therapist discuss a myriad of issues, events, experiences and memories for the purpose of creating positive change. This change typically requires substantial effort by Client including an active participation in the therapeutic process, honesty, and a willingness to change feelings, thoughts and behaviors. Participating may also involve some discomfort and it is pretty common for Client to feel worse before they feel better. Participating can also have unintended outcomes such as a breakup in a relationship or other life change.
3. Client understands that progress and length of therapy vary from person to person and Client will bring any concerns of progress in therapy or the length of therapy to Therapist.
4. Therapist can contact Client via email, internet phone, telephone, cell phone, skype, and other internet means. Client understands that Therapist will make every effort to protect Client confidentiality on the internet, and also realizes that confidentiality on the internet is not fully reliable.
5. Client understands that information will be held confidential unless Client states otherwise in writing, except as required by law. Client understands that certain topics may be anonymously and hypothetically shared with other coaching and psychotherapy professionals for training and/or consultation purposes.
6. Disclosure is required by law where there is a reasonable suspicion of child, dependent or elder abuse or neglect; where a client presents a danger to self, to others, to property, or is gravely disabled. In the very rare case that Client places their mental status at issue in litigation initiated by Client, the right to confidentiality of records and/or testimony is waived.
7. The rate for a one hour session is \$160/50 minute session and rates are sometimes increased by \$10 once per year. Many insurance plans cover psychological services, however Client will need to file for reimbursement on their own and if needed, Therapist will provide Client with a receipt for service to submit to their insurance company.
8. Client has the right to terminate services at any time, and is encouraged to give Therapist advance notice to plan termination and closure. Therapist can terminate therapy with the client under certain circumstances, such as non-payment of fees, ethical concerns or concerns about clinical issues.
Please initial: ____ A minimum of 48 hours (2 days) notice is required for rescheduling or canceling an appointment. Unless Client and Therapist reach a different written agreement, the full fee will be charged for sessions missed without notification. There is no charge for the first such miss. Client understands their role and Therapist's role in their co-creative professional relationship. Client has read this agreement and will ask questions to clarify anything they do not understand. Client agrees to comply with all policies stated above:
Client Signature: _____ Printed Name: _____

Date: _____