## Soul-Etudes LLC Dr. Debra Sutton, MDiv, PhD, MFT

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1105 East Lincoln Highway Exton, PA 19341

## **Consent to Treatment**

- Treatment is of a voluntary nature.
- Confidentiality is extremely important. Information revealed during treatment will be kept strictly confidential. There are exceptions to this, however, mandated by law.

If you disclose your intention to inflict physical harm to yourself or another person;

If there is reasonable cause to suspect physical abuse or neglect and/or sexual abuse of a minor child, or

If I receive a (valid) court order requesting records.

In addition, I may communicate with other therapeutic staff (therapists, psychiatrists, or clinical supervisors) about your treatment.

- Payment (\$150.00) is due at time of service. I accept cash, checks (payable to Soul-Etudes LLC), and VenMo. Reduced fees and scholarships will be reevaluated quarterly to assess eligibility.
- The full fee (\$150.00) will be charged for a missed appointment or one cancelled with less than 48 hours notice. This applies to all clients including those receiving a scholarship and/or reduced fee.

I acknowledge that I have read and understand the information above.

Name of Client(s) and Parent/Legal Guardian (if under 14 years old)

Signature of Client(s) or Parent/Legal Guardian (if under 14 years old)

Date: