

Curtis Counseling

Client Authorization

I authorize Curtis Counseling to provide counseling and therapeutic services. No guarantees have been given by Curtis Counseling as to the results that may be obtained. I indemnify and hold harmless the therapist or mediator and Curtis Counseling from any and all claims arising directly or indirectly from the services rendered by the therapist under this agreement. Such indemnification shall include reasonable attorney fees and costs.

I have received the State of WA booklet, including the section about my rights. I understand the information in that booklet. I understand the terms, including the fees for counseling services at Curtis Counseling.

Client's Signature:

Date:

Parent/Guardian Signature (minors only):

Witness' Signature:

Revised 10/2015