



CONFIDENTIALITY STATEMENT

Your therapy records are the property of your counselor and shall be treated as confidential. To comply with state and federal laws your records will not be released without properly executed written consent. Everything about your care will be held in strictest confidence (with the exception of those situations which we are required by law to report). If you choose to have your counselor keep a third party informed of your progress, it is necessary to complete a **“Release of Information Form”** that will be kept on file.

The following circumstances are an exception to keeping confidentiality and are required by law to report:

- A. *When a client communicates threat of bodily injury to self another person or is suicidal.*
- B. *When there is reasonable suspicion of abuse to a child or a dependent adult which has occurred or will occur.*
- C. *When information is required by law or is ordered by the court.*
- D. *Counselor Team.* Counselors typically work as a team and reserve the right to consult and discuss pertinent information with other counselors and supervisors within the counseling field. On rare occasion we may request that we be allowed to video your therapist during a session for training purposes. You may always decline this request.

It is important to remember that electronic communication such as e-mail, faxes, text messages, and cell phone calls are not secure. Please keep this in mind when there is communication with a counselor. If you have any questions about confidentiality, please discuss them with your counselor.

I have read and understood the above information regarding confidentiality. I agree to disclose personal information with these exceptions in mind.

Client(s) Signature

Date

Parent/Guardian of Minor Signature (if applicable)

Date

Kimberly Mason, Ph.D., LPC-S, NCC Counselor Signature

Date