



Jude Marleau, M.Ed., Registered Clinical Counsellor, Clinical Supervisor

## Fees and Client Agreement Form

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### Professional Counselling and Clinical Supervision Fees

As recommended by my governing association, the BC Association of Clinical Counsellors, my professional fees are \$150 (+GST) for a one hour session.

For Couples Counselling, I recommend booking 1.5 hour sessions.

### Extended Health Benefits

If you or your partner have extended health benefits through your employment or pension plan, your counselling sessions may be eligible for full or partial coverage. Contact your benefit provider for more information.

### Payment Options

I accept cash or e-transfers. Payment for session is required the day of the session.

### Cancellation

Please note that 24 hours' notice to change or cancel an appointment is necessary, or the full session fee will be charged.

### Confidentiality

Your confidentiality will be respected and protected with the exceptions noted below:

1. If there is reason to believe that a child under the age of 19 is likely to be harmed or is in need of protection, under Section 13 of the Child, Family and Community Service Act, I am required to inform the appropriate persons in the Ministry for Children and Family Development.
2. If I have reason to believe that you might cause serious physical harm to yourself or someone else, I will intervene by informing the appropriate individuals (family doctor, police, etc.).
3. If a judge orders that your file is to be submitted as evidence in a trial or if I am required to testify in court, I must comply with that Order.



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Name: \_\_\_\_\_

Pronoun: \_\_\_\_\_

Best phone number to reach you: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Family Physician: \_\_\_\_\_

Person to notify in case of emergency: \_\_\_\_\_

How did you hear about my Services? \_\_\_\_\_

*I agree to the conditions described in the Fees and Client Agreement.*

Client Signature: \_\_\_\_\_

Date: \_\_\_\_\_