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CONSENT FOR TREATMENT- CHILDREN

Client Name: _____

It is important that you understand the policy and procedures regarding the treatment of minors (children under 18 years of age) at the beginning of service so that you can make an informed decision about receiving services. This information is in addition to the Counseling Agreement.

⊖ Parents/Guardians are expected to be involved in their child's therapy sessions. All children must initially be brought to therapy sessions by a parent or guardian and that person must remain in the office during the time your child is being seen. If an alternate accompanying adult is desired for future sessions, it is important to discuss this option prior to the session.

⊖ A Parent or Guardian who has legal authority to do so must consent to their child's treatment. A court order to verify that you are the legal parent or guardian may be necessary when there has been more than one guardian involved.

⊖ Virginia Law allows for either parent to have access to their child's records or information, unless there is a court order limiting access or terminating parental rights. If and when a parent makes a request, the other parent will be notified. Professionals providing services to a child must comply with legitimate requests.

⊖ When considering involving your child's therapist in legal proceedings please take the time to evaluate the impact this may have on your child's treatment. It is important to recognize the importance of the relationship that your child will be developing with the therapist. The trust that is built into the sessions is the foundation for change and growth in your child. By requesting participation in legal proceedings, you could be betraying the trust and relationship being built with your child.

I acknowledge that I have read and agree to all of the above provisions about seeking services for my child. I certify that I am the legal parent/guardian and have the authority to consent to services

Parent/Legal Guardian Signature: _____

Date: _____

Parent/Legal Guardian Signature: _____

Date: _____