

MARCIA JOHNSTON WOOD, Ph.D.
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ATTENDANCE AGREEMENT FOR NON-CLIENT ATTENDEES

For: _____
Name of Non-Client Attendee

You have been invited to attend one or more sessions with _____ (Client) in order to provide additional information that might be helpful to Client's therapy with me. It is important that we all understand some very important ground rules before you attend these sessions.

- 1) You will not be billed for these sessions. Although you are here to assist in therapy for Client, you are not considered a client of mine and you will not be responsible for payment of my services. Although you may experience some personal benefit from these sessions, you understand and agree that this is not intended to be therapy for you.
- 2) Since you are not a client of mine, any information that you choose to disclose to me is not privileged. Any information you disclose to me may be disclosed to Client and that information may be documented in Client's chart. Once the information is placed in the chart, it may be subject to further disclosure pursuant to court order, subpoena, or authorization of Client. You will not have the right to inspect or receive copies of that information or to prevent its disclosure.
- 3) Since you are not my client, I may be required to report to law enforcement if I have reasonable cause to believe that abuse has occurred. I may also disclose information if I feel that you or others are at risk of harm, or if I believe that you may commit a crime in the future involving serious injury.
- 4) If at any time you feel the need for individual therapy, you may ask me for a referral to another therapist. I will not provide those services directly and our meeting is not for the purpose of providing therapy.

I have read this disclosure statement, I have been given full opportunity to discuss its contents with Dr. Wood and I agree to its terms. By signing below I agree and understand that I am not a client of Dr. Wood.

Signature of Non-Client Attendee

Date

The above party may participate in my treatment. I understand the terms of their participation.

Signature of Client

Date