Life Spiritual Essentials, LLC.
Cyndi W. Bell, Christian Temperament Counselor
Catonsville, Maryland 21228
Phone: (443) 386.2661
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CONSENT TO COUNSELING

I. Consent to counseling provided by Life Spiritual Essentials, LLC (LSE).

I acknowledge that I have received, have read (or read to me) and understand the "Client Rights" handout, "Notice of Privacy Practices," and other information about the counseling I am considering. I have had all my questions answered.

I do hereby seek and consent to participate in counseling with "Cynthia W. Bell, owner of Life Spiritual Essentials, LLC," certified Temperament Counselor and licensed Pastoral Counselor. I understand that developing a plan for counseling and regularly reviewing our work toward reaching the counseling goals we establish are an important part of counseling. I agree to play an active role in this process. I understand that no promises have been made to me as to the results of counseling.

II. Video Conferencing Consent

Video conferencing will be used at Life Spiritual Essentials, LLC as aid in the counseling process during times when face-to-face counseling is not feasible.

I, the undersigned, do consent to video conferencing tools for my counseling sessions. This consent is being given in consideration of the professional services being rendered by Life Spiritual Essentials, LLC.

I understand that I have the following rights with respect to video conferencing:

1. I have the right to withhold or withdraw consent at any time without affecting my right to future counseling services.

2. I understand that there are risks and consequences from video conferencing, including, but not limited to, the possibility, despite reasonable efforts on the part of Life Spiritual Essentials, LLC, that: the transmission of my information could be disrupted or distorted by technical failures; the transmission of my information could be interrupted by unauthorized persons.

3. I understand that video conferencing does not provide emergency services. If I am experiencing an emergency, I understand that I can call 911 or proceed to the nearest hospital emergency room for help. If I am having suicidal thoughts or making plans to harm myself, I can call the National Suicide Prevention Lifeline at 1.800. 273.TALK (8255) or dial 988 for free 24-hour hotline support.

4. I understand that I am responsible for (1) providing the necessary computer, telecommunications equipment, and internet access for my video conferencing sessions, (2) the information security on my computer, and (3) arranging a location with sufficient lighting and privacy that is free from distractions or intrusions for my video conferencing

session.

III. Fees and Payment Consent

I am aware that insurance is not accepted, and payment is due prior to receiving counseling service. I am aware that I may stop my counseling service at any time.

I understand counseling fees, administrative fees, and discounts for services are subject to change at any time. All fees and discounts are available on the Life Spiritual Essentials, LLC website (lifespiritualessentials.com).

I must call to cancel or reschedule an appointment at least 24 hours prior to the appointment time (excluding emergencies with documentation). If I do not cancel or do not show up, I will be responsible for paying the $25 fee for the missed session.

IV. Agreement Consent

☐ I have been given the Notice of Privacy Practices.

My signature below indicates that I understand and agree with all these statements.

_____

Signature of Client Date

_____

Signature of Parent/Guardian Date

I, **Cynthia W. Bell, owner of Life Spiritual Essentials, LLC**, have discussed the above issues with the client (and guardian). My observations of this person's responses and behaviors give me no reason to believe that this person is not fully competent to give informed and willing consent.

_____

Signature of Counselor Date