

Informed Consent for a Visitor in a Psychotherapy Consultation

CLIENT:

I, _____, understand that if I invite a third person to be present during a session with my psychotherapy consultant that my confidentiality is automatically compromised. I request to do so with the understanding that my therapist will use discretion but cannot promise absolute confidentiality.

Name (please print)

Signature

Date

GUEST:

I, _____, understand that I am being invited as a guest to attend a session with the above person's therapist. I further understand that the therapist works as a confidential agent for this person and cannot grant me confidentiality. The therapist is not free to divulge confidential information to me.

Name (please print)

Signature

Date