

**Ariana Candell, MFT  
2915 Martin Luther King Fr. Way  
Berkeley, CA 94703  
510-255-1141**

## **CLIENT INFORMATION AND TREATMENT AGREEMENT**

**FEE.** My standard fee for a 50-minute hour of therapy with an individual or couple is \$150. I generally do not charge any additional fee for time spent reviewing your case, consulting with other providers as needed (with our written permission), or assisting you with insurance billing. Fees are due at the beginning of each session, by check, cash, Square or Paypal.

**CANCELLATIONS.** For therapy to be effective, it is important to attend your sessions regularly. If you need to cancel or change your appointment, please call no less than 48 hours in advance of your appointment time, or you will owe your usual hourly fee. I prefer to have as much advance notice as possible for changes. You can call my voicemail 24 hours a day, 7 days a week. In rare emergency cases, such as a sudden serious illness or death in the family, I will do my best to reschedule in the next 2-3 days. If we cannot find a mutual time to reschedule, you must pay the usual fee.

**SLIDING SCALE.** A fee reduction (sliding scale) may be available based on financial need; or changes in your financial situation (resulting in either lowering or raising a sliding scale fee). None of the full standard fee will be waived for any sessions for which you receive full or partial insurance reimbursement (including sessions which are applied toward your deductible). All fees, (on the sliding scale or not), may be raised by a nominal amount approximately once a year (typically in January). I will give you 30 days notice of any fee raise.

**PAYMENT.** Payment is due at the time of your appointment. However, if you are having temporary financial difficulty, please call me to discuss payment arrangements so that we can maintain the continuity of your therapy. For clients paying with insurance, if the insurance does not pay for the sessions given, the client is responsible for payment.

**PHONE CALLS.** I am available by phone if you need to reach me between sessions. Please leave a message on my confidential voicemail: 510-255-1141. I check this several times daily and less often on the weekends. If you need a check in or short phone consultation between sessions, one 10-minute conversation is free of charge. If you need more time, I charge my regular fee prorated in 10-minute increments.

**CONFIDENTIALITY.** No identifying information about you will be given to anyone, with these exceptions:

- If you sign a written consent form allowing me to discuss your case with a specific person.
- If I must make a legally required report about abuse of children or dependent or elderly adults.
- If there is imminent danger of your doing serious physical harm to yourself or others.
- If I receive a valid subpoena from a judge (not an attorney).
- If you have a medical emergency at my office.
- If you see me for couples or family therapy, confidentiality does not include my keeping secrets from those who attend conjoint sessions. If you share information with me privately, please be prepared to discuss it in our next session.
- It is occasionally necessary to consult an adjunct professional to enhance the quality of your therapy. In this case, I will only use the first initial of our name in consultation.

**DRUGS.** Please attend therapy sessions with a minimum of 24 hours free from drugs and alcohol, except for medications prescribed by a physician. If you are in recovery, think you might be having problems with drugs or alcohol, or are taking any mood-altering medications, please let me know so that we can discuss how this might affect your therapy.

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**PROCESS OF THERAPY.** Participation in therapy can result in a number of benefits to you, including changing patterns in your life that no longer serve you, improving interpersonal relationships and resolving specific issues that let you to seek therapy. Working toward these benefits requires your very active involvement, honesty, and openness. In the process of therapy, you may remember and talk about unpleasant events, feeling, or thoughts. These can result in you experience considerable discomfort or strong feeling of anger, sadness, anxiety, depression, insomnia, etc. Though this is a challenging part of therapy, it is natural, and we will discuss how to manage these experiences. Despite high satisfaction rating s in people who participate in psychotherapy, it is unethical and unrealistic for a therapist to guarantee results and there is a possibility that you will not meet all the goals you set out to achieve in therapy. As an MFT, I cannot legally advise you on medical or legal matters, but can give you referrals to those who can. It is also considered unethical to advise clients on whether to remain in their marriages or relationships.

**SOMATIC PSYCHOTHERAPY.** Our bodies are a great pathway and resource that are often overlooked by many traditional psychotherapies. In body-centered psychotherapy (I use the Hakomi Method) we can discover information not usually available to our conscious mind. By becoming mindfully aware of the present experience of our sensation, feeling, movements, gestures, and impulses, our innate body messages and wisdom can arise. The conscious integration of this new information can greatly benefit your understanding of yourself and can inspire new choices and behaviors.

**DANCE/MOVEMENT THERAPY** is a powerful body psychotherapy you may want to explore. Many people find that including the whole body in movement gives new, more integrative awareness that is expressive or improvisational movement and dance, or physically role-playing a new behavior centered on a theme. I may guide you in using elements of Authentic Movement, the Blanche Even Method, or Body Tales.

**TOUCH.** Because our work together seeks to explore and heal the self as a whole, body, and mind. Our sessions may involve moments of physical contact. This is done to support the body or to facilitate a deepening of experience. It might mean being touched, or held, or physically supported. Any touch offered will only be carried out with your permission and with the utmost integrity and respect. Touch is never sexual. You are, at all times, free to agree to have physical contact or not. You can also choose to never incorporate touch into our sessions and will still benefit from the other aspects of the therapeutic work.

**INFORMED CONSENT.** When you consent to be a psychotherapy client, you do so voluntarily. Some of your rights include (1) asking my opinion about your progress, (2) making your own decisions about your life, and (3) having a relationship that is exclusively therapeutic. You also have a right to terminate therapy at any time (however, I believe you will get the most out of the whole therapy process if we discuss any plan to end therapy well in advance).

**If you have any questions regarding this agreement, I am happy to discuss them with you. By signing your name, you acknowledge understanding and agreeing to these policies.**

Client Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

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