

Veronica Monet, ACS, CAM
Certified Sexologist and Certified Anger Management Specialist

Parent Consent Form

Thank you for trusting me to assist you with your personal concerns. Please take the time to read and understand this document and ask me about any portion which may be unclear to you.

Veronica Monet, ACS, CAM will provide coaching and guidance services to your child(ren) _____ & _____.

The goal is to help your child(ren) be successful emotionally and socially. Individual, couple and family coaching is available to enhance your child(ren)'s success. I am requesting your involvement, and need permission to see your child. This consent is valid until termination of the coaching relationship. You have the right to revoke consent at any time. Verbal or written notification will be accepted.

I understand the information stated in this form and give consent for my child(ren) _____ & _____ to receive coaching from Veronica Monet, ACS, CAM at 206 Sacramento Street, Suite 206, Nevada City, California.

Parent's Signature: _____ Date: _____

Parent's Name: _____ Relationship: _____

Home Phone: _____ OK to leave message? Yes No

Work Phone: _____ OK to leave message? Yes No

Home Address: _____ State, Zip _____

Parent's Signature: _____ Date: _____

Parent's Name: _____ Relationship: _____

Home Phone: _____ OK to leave message? Yes No

Work Phone: _____ OK to leave message? Yes No

Home Address: _____ State, Zip _____

If child's parents are legally separated or divorced, please complete the following*:

Legal Custody: Mother _____ % Father _____ %

Physical Custody Mother _____ % Father _____ %

*Please provide a copy of the custody agreement.

Confidentiality

For coaching to be effective, confidentiality must be honored. No information will be shared with a party outside of my office without your written consent. Additionally, information your child shares with me in his/her private sessions will be held confidential. However, the goals and progress of the coaching may be shared with you, any other legal custodial parent or guardian. By law, confidentiality must be breached if a practitioner suspects that any minor is being or has been abused, if a person plans to physically harm another person, or if a person plans to harm him/herself.

Eligibility and Fees

My services are available to individuals, couples, groups, adolescents as well as families. I will collect \$150.00 per individual session at the time of services rendered. The fee for sessions for couples is \$200.00 an hour. Family and group session fees depend upon the number of participants.

Policies Regarding Appointments

Individual and couples appointments are generally for 60 minutes and are typically scheduled once per week at a time you and I agree on. If you cannot make a scheduled appointment, it is your responsibility to call or text (415) 407-2932 to cancel within 24 hours. I typically check my voicemail at least once daily, except on weekends. If you forget an appointment, call or text (415) 407-2932 as soon as possible to reschedule. If you miss your appointment and do not call within 24 hours to cancel, you will be charged your regular session fee. In addition, there is no guarantee that I will have another available appointment time during that same week. If for some reason you are late, please understand that I must still follow my regular schedule in ending appointments.

In an Emergency

In some instances, you might need immediate help at a time when Veronica Monet is not available or cannot return your call. These emergencies may involve suicidal thoughts, thoughts of wanting to hurt someone else, or thoughts of committing dangerous acts. If you find yourself in any emergency situation please call 911. Or, you may call the crisis line (530) 272-3467 and ask to speak with the counselor on call. In addition, you can visit the nearest Emergency Room and ask for the mental health professional on call.

Veronica Monet, ACS, CAM

206 Sacramento Street, Suite 206 • Nevada City, CA 95959 (415) 407-2932