



VANCOUVER COUNSELLING AND HYPNOTHERAPY

TURNING POINT HYPNOTHERAPY

Client Rights and Agreement

The following information is intended to help you understand your rights and obligations as a client. Please feel free to raise any questions you may have.

A. **Privacy and Confidentiality**

VANCOUVER COUNSELLING AND HYPNOTHERAPY places a very high priority on the confidentiality of client information. While personal information may be entered into your files, every effort is made to avoid the entry of sensitive material that you share with your therapist during a session. Your client file is stored in a secure location and only accessible by your therapist. Persons from outside VANCOUVER COUNSELLING AND HYPNOTHERAPY neither have access to your files nor are they made aware of your involvement in therapy.

This agreement is between you and VANCOUVER COUNSELLING AND HYPNOTHERAPY. Written permission by you or a court order is required to release your information.

Please note these exceptions: Your right to confidentiality and privacy *is not* absolute. Circumstances under which the confidentiality of private information cannot be assured, and we are therefore not liable for its release, include cases where: 1) we are compelled by law to report any circumstance where there is the possibility of danger to others or yourself, 2) we are compelled by law to report any possibility of the existence of child neglect, physical, or sexual abuse; and, 3) nonpayment of fees will waive your rights to confidentiality due to the resulting use of litigation or collection agencies to recover unpaid fees.

B. **Appointment Booking, Cancellations**

After booking your session over the phone or email, you can confirm your appointment by providing payment through Interact transfer (e-transfer) or PayPal. Information will be provided to you at the time of booking your session. Sessions are only officially booked once payment is received. If you need to reschedule or cancel your appointment, please contact VANCOUVER COUNSELLING AND HYPNOTHERAPY at least 48 hours in advance so that we may make that time available to another client. An official receipt will be issued for medical claims and tax purposes.

A cancellation fee of \$195 will be retained for no shows and for appointment changes that are less than 48 hours in advance.

Note: If you are 20 minutes or more late for your session it will be considered a cancellation "without appropriate notice" and \$195 cancellation fee will be charged. Please note that sessions are 120 and 90 minutes in length (see below) and out of respect for other clients, sessions cannot be extended, therefore, it is strongly recommended that you arrive on time to ensure you receive maximum value from your session.

C. **Fees, Payment and Refunds**

All fees are non-refundable with the exception of **48 hours cancellation notice** (see above), **and are subject to GST**. Multiple Session Package refunds will be calculated based on the number of sessions used at a rate of a Single session. All Multiple Session Packages must be paid in full prior to the commencement of the first session. We accept cash, Interact transfers and credit cards payments through PayPal. Personal cheques may be accepted upon mutual agreement. First session must be pre-paid via Interact transfer or PayPal no less than 24hrs prior to the start of the session.

Initial Intake Session - \$220 (Includes extensive history Intake and initial introduction to hypnosis)

Single Session* (90 minutes) - \$195

4 Session Package - \$ 749

6 Session Package - \$1099

8 Session Package - \$1435

Additional time is charged at a rate of \$130/hour

Prices are subject to change without notice.

***All sessions are 90 minutes in length with the exception of initial intake session which is 120 minutes. All Multiple Package Sessions DO NOT include Initial Intake session.**

Longer sessions are designed to allow for considerable work to be achieved during each session as well as integration of information after hypnosis.

D. **Clients Rights**

You have the right to expect confidentiality as stated above. You have the right to discontinue therapy at any time. If you have any concerns about the service you are receiving, we encourage you to discuss this openly with your therapist.

I UNDERSTAND AND AGREE TO THE ABOVE CONDITIONS:

Clients Name: _____

Client(s) Signature: Date: _____

Therapist: Joanna Banka, RPC, RCCH, CMLC, CHtA, TLPT

Date: _____