Client Name(s) and Date of Birth	 Date of	Client ID
	Agreement	

#### Fees for Court Preparation and Appearance:

Please note that my fee to appear in court is \$2,000 (two thousand dollars), per appearance. In the event that I receive a subpoena to appear in court to testify on the behalf of you, your child, or any other family members, there will be a fee of \$2,000. I do not voluntarily testify in court cases. Other fees include; \$250 per hour to prepare records for submission to court, \$250 per hour for depositions and phone contacts, and all attorney costs incurred by therapist as result of legal action.

Note that this fee is payable 7 days prior to your court date. Since I will be required to clear my calendar of all appointments and prior engagements so that I may be available to appear in court, this fee is non-refundable. If your court date is postponed and I must again clear my calendar to attend court, you will again be charged the full fee. If your court date is cancelled this fee is non-refundable. No further appointments will be scheduled until this fee is paid in full. If this payment is not paid in full within one calendar month it will be brought to collections.

# **Divorce/Custody Cases:**

Please be advised that, if I receive a subpoena to testify in a divorce/custody case, I will not make a custody recommendation, or a recommendation of where a child should live, nor will I make a determination as to one's fitness as a parent.

## Confidentiality:

Your rights to privacy and confidentiality are important to me and I work hard to protect them. There are also laws in place to protect you. Please note there are situations during court and legal proceedings where they may be compromised. Examples of this include you waiving confidentially by agreeing to disclose the client's mental health records in a lawsuit for emotional distress; your decision to pursue a lawsuit where the client's mental or emotional condition is relevant or critical; if the client's records are requested by a valid subpoena or court order. It is your responsibility to learn how to confidentially and privacy may be compromised as a result of legal or court proceedings.

#### **Non-Payment:**

If you have not paid your court-related fees and do not respond to my attempts to contact you and work out a payment plan, I have the option of using legal means to secure the payment. This involves hiring a collection agency or going through small claims court. In

most collection situations, the only information I release regarding a patient's treatment is his/her name, the nature of the services provided, and the amount due. A late fee of 20% of the unpaid balance will be charged each month that a balance remains unpaid.

## **Clients Statement of Agreement:**

I have read this notice and fully understand the statement. I agree to pay the full fee of \$2,000, seven (7) days in advance, for any court appearance this therapist may need to make on behalf of myself, my child, or any other family member. I understand that my therapist is not responsible for the outcome, or any judgments made, regarding my court case.

Client Signature:
Client Name (Please Print):
Date: