

MANDATORY DISCLOSURE FORM FOR EQUINE SUMMER CAMPS
8778 Arapahoe, Boulder, CO 80302

Therapist: Eve Ellis Degrees: B.A., M.A.

Credentials: MA Transpersonal Psychology and Wilderness Therapy, Certified Synergetic Play Therapist & Supervisor, Gestalt Training, Psychotherapy with Equines Training, LPC.0012074

Therapist: Heather Gunther Degrees: B.A., M.A.

Credentials: MA Transpersonal Counseling, Certified Synergetic Play Therapist & Supervisor, Gestalt Training, Equine Training, 3000+ hrs & 150+ hrs CEC Play Therapy, Life Transformed Coach, NLC.0014227

CRS 12-43-214 (1) (c) provides that the practice of both licensed and unlicensed person in the field of psychotherapy is regulated by the Department of Regulatory Agencies. Questions or complaint may be addressed to:

STATE GRIEVANCE BOARD
1560 BROADWAY, SUITE 1340, DENVER, CO 80202
(303) 894-7766

CRS 12-43-214 (1) (d) Privileged Communications – The information provided by a client during therapy sessions is legally confidential, except as provided in section 12-43-218 and except for certain legal exceptions which will be identified by the therapist should any such situation arise during therapy.

You are entitled to receive information about methods and techniques of therapy and assessment, expected duration (if known), and the fee structure. You may ask a second opinion or terminate at any time. In a professional psychotherapeutic relationship, sexual intimacy is never appropriate and is reportable.

I have been informed of my therapist's degrees, credentials, and licenses. I have read the preceding information and understand my rights as a client. I also acknowledge that I have satisfied myself as concerns any questions relating to this disclosure form before signing below.

Client Name Phone number Parent Email

Address (Mailing)

Print Name and Client Signature (If minor, Parent signature) Date

Therapist's Signature Date