



Client Name: \_\_\_\_\_ Client #: \_\_\_\_\_

## Therapy Participation Agreement

Psychotherapy can be an effective treatment for a variety of mental health conditions and concerns. It can assist you in developing new coping skills that will empower you to overcome the stressors and symptoms that prevent you from enjoying life to its fullest.

Effective therapy however, is different than a doctor's appointment. Effective therapy depends greatly on your active participation in the therapeutic process and development of a strong therapeutic relationship with your therapist. For this reason, it is imperative to attend and participate in therapy sessions on a regular basis.

At Recovery Technology we ask that you miss no more than 2 appointments per any 3 month period that you are in services with us. **Missing any more than 2 appointments within 3 months will result in discharge from services.** We understand that at times unforeseen circumstances may prevent you from participating in your scheduled sessions. If you are unable to keep an appointment with your therapist we request that you cancel no later than 24 hours prior to the scheduled appointment. **If you do not cancel prior to 24 hours, your absence will be considered a missed appointment.**

If you are discharged from therapy services due to missed appointments or due to not responding to our attempts to reach you after a missed appointment, **you will not be able to return to therapy services at Recovery Technology until a period of at least one year past the date you are discharged.** If you wish to return to therapy services after one year has passed, your return may be considered but it is not guaranteed and may require negotiation.

By signing below, I acknowledge that I understand and agree to the above attendance conditions.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_