

INFORMED CONSENT FOR THERAPY

I, _____, understand that I am seeking therapy services from MindfulGen (AKA Mindful Generation), a therapy practice. I understand that the purpose of therapy is to help me understand and manage my thoughts, feelings, and behaviors. I understand that therapy is a process that involves active participation and effort on my part.

I understand that therapy may involve the use of various techniques and approaches, including but not limited to, talk therapy, cognitive-behavioral therapy, and mindfulness-based therapy. I understand that therapy may involve discussing personal and sensitive information.

I understand that the therapist is a licensed professional with the necessary legal qualifications to provide therapy services. I understand that the therapist will keep information about me confidential, except as required by law.

I understand that there are potential risks associated with therapy, including but not limited to, the possibility of feeling worse before feeling better, the possibility of experiencing uncomfortable emotions, and the possibility of experiencing a temporary increase in symptoms.

I understand that therapy may not be suitable for everyone and that I can discontinue therapy at any time.

I understand that there may be fees associated with therapy, and that I will be informed of these fees in advance.

I have read and understand the above information, and I freely and voluntarily consent to participate in therapy with MindfulGen.

Signature of Client: _____

Date: _____