

# BRIGHT HOPE

Christian Counseling Center, PLLC

*Serving Individual Adult, Adolescent, Children and Couples*

270 North Main, Logan, UT 8321 – Phone: 801-317-4410 – Fax: 435-227-0401 – Email: ron@bhccc.org – Web: https://bhccc.org

## HIGH-CONFLICT PARENTING CUSTODY OF MINOR CLIENT POLICY

BHCCC therapist will implement the following requirements and communication for the purpose of efficient communication and understanding with all parties involved.

1. Minor client's session has been set for:
  - a. Day: \_\_\_\_\_
  - b. Time: \_\_\_\_\_
  - c. Location: 270 North Main, Logan, UT 84321
  - d. Session type:  In-person  TeleHealth
2. **Session fee:** \_\_\_\_\_  
 Direct Pay  Insurance Pay  Other Method

The parent who brings the minor to the session will be responsible for that session's fee.

3. **Cancelation/Reschedule of session:** Client's parent will be required to contact the therapist with a 24-hour notification by phone or email to cancel or reschedule the client's session.
4. **No-Show:** A **\$75** no-show fee will be charged to the parent when the therapist has not received a 24-hour notification of cancellation of session.
5. **Communication with minor client's Guardian ad Litem (GAL):**
  - a. The therapist shall communicate with the GAL about any client no-shows and consecutive cancelation of appointments.
  - b. The therapist shall communicate with the GAL with regards to the client's progress or lack of progress as the therapist deemed necessary for the sole purpose of advocating for the minor client's best interest.

By signing this policy, I acknowledge I have received, read, understood and agree with this policy.

Mother:

Father:

Date:

Date: