

# BRIGHT HOPE

Christian Counseling Center, PLLC

*Serving Individual Adult, Adolescent, Children and Couples*

270 North Main, Logan, UT 84321 – Phone: 801-317-4410 – Fax: 435-227-0401 – Email: [karen@bhccc.org](mailto:karen@bhccc.org) – Web: <https://bhccc.org>

## CONFIDENTIAL CLIENT COMMUNICATION

BHCCC is in compliance with the HIPPA (Health Insurance Portability and Accountability Act) to protect the privacy and confidentiality of your information and communication. You have the right to request that BHCCC communicates financial and/or medical information to you in confidence by a particular method or certain locations. In order to effectively protect the privacy and confidentiality of your information, please complete the form below to let us know about ways you would like to be contacted.

I wish to be contacted by (check all that applies):

**PHONE COMMUNICATION:**

BHCCC **will not** leave information about your medical information on your voicemail.

BHCCC is permitted to leave our name and call back number in your voicemail:  Yes  No

BHCCC is permitted to call and remind me of my appointment date and time:  Yes  No

Cell phone: \_\_\_\_\_ Leave messages:  Yes  No

Home phone: \_\_\_\_\_ Leave messages:  Yes  No

Work phone: \_\_\_\_\_ Leave messages:  Yes  No

**EMAIL COMMUNICATION:**

BHCCC is permitted to communicate with me via email messages. I understand that email site is not secure. BHCCC and I shall not disclose any names and personal information in the email:

Yes  No

BHCCC is permitted to email me of my appointment date and time:  Yes  No

Email address: \_\_\_\_\_

**WRITTEN COMMUNICATION:**

BHCCC is permitted to communicate with me via regular mail:  Yes  No

BHCCC is permitted to mail me my written medical records:  Yes  No

Mailing address: \_\_\_\_\_

**Acknowledgment & Signature:**

I have read and agreed to the terms outlined in this document, **CONFIDENTIAL CLIENT INFORMATION**. I acknowledge that I am the Client, or a legal representative of the client. I agree that my e-signature below is a legally binding equivalent to my handwritten signature.

Client Name (Print): \_\_\_\_\_

Client Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Father's Name (Print): \_\_\_\_\_

Father's Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Mother's Name (Print): \_\_\_\_\_

Mother's Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_