

Group Therapy Contract

By signing this contract, I agree to participate in Kristin Hollis’s teens therapy group which meets weekly at 4 pm. The group will meet in the waiting area of the Camp Hill office. The group will meet for 10 sessions (5/30/19, 6/6/19, 6/13/19, 6/20/19, 6/27/19, 7/18/19, 7/25/19, 8/1/19, 8/8/19, 8/15/19). There will be a break on 7/4/19 and 7/11/19. I understand the importance of attending each meeting and arriving on time.

The purpose of this group is to increase both my understanding of myself as an individual and my ability to have healthy, long term relationships. To do this, I agree to:

- **Attend every session.** There will be at most two excused absences of the ten scheduled sessions. It is my responsibility to share absences to the group **one week** prior to these absences, the full cost of the session (**\$30**) will be owed for other absences. This can be brought to the next group or mailed in.
- **Strict Confidentiality.** I will not discuss what happened or what was talked about during group outside of the group sessions. Outside of group sessions I may talk about my own personal reactions, but not about others’ identifying information or reactions. I promise to tell no one the names of the group members or in any other way allow someone who is not in the group to learn their names.
- **Arrive on time.** I agree to arrive by myself and wait in the waiting area until group starts. If someone brings me, they will not come into the office to maintain confidentiality and I will meet them in the parking lot at the end of the group. Doors will be locked at 4:05 PM and if I am not present by this time, it will be considered a no-show for which the full cost of session will be owed (**\$30**). It is my responsibility to have an arrangement to go home by no later than 5:15 PM. If I do not have a ride present by 5:15 PM, I understand there will be a fee of **\$45 in 15-minute increments** until my ride arrives.
- **Self-disclose about my own issues and feelings in the group.**
- **Honestly report my behaviors.**
- **Keep my promises.**
- **Be open in providing feedback to group members.**
- **Share my impressions of others in respectful ways.**

Signed:

Client Signature	Date

Clinician Signature	Date