



THERESA J. PAGE, MA, LPC
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Child Therapy Agreement

Name of Child: _____

- 1.) My role as therapist for your child is to create a therapeutic and safe environment for the sharing and working through of your child's feelings related to your divorce, and other issues that may be interfering with your child's optimal development. It is understood that it is essential for the benefit of your child that I maintain neutrality in any divorce-related disputes. In the event that any custody or divorce disputes continue, you agree that you will not use me or my therapy records in legal proceedings so that I may remain a therapeutic resource for your child.
- 2.) It is understood that I am not conducting a custody evaluation, or an abuse investigation. If you or I believe that either of these need to be conducted, those services would be obtained from another independent professional who would be the one to give the results directly to your attorneys, With your permission and/or under legal guidelines, I would provided information directly to the qualified professional or agency conducting those investigations to assist in their research and recommendations.
- 3.) It is understood that both parents give permission for me to release nay information obtained during the course of therapy to the other if I believe it is in the best interest of your child. However, it is also understood that for me to be the most help to your child, each parents needs to feel they can be honest about whatever difficulties they are having with parenting in their household. Therefore, I will discuss with each parent only issues with their child occurring in their own household. It is understood that my role is not as a "go-between" to share information about one household with the other.
- 4.) If conflict between parents appears to be interfering with your child's treatment and well-being, I may recommend mediation, or a parent coordinator, to help resolve conflicts.
- 5.) It is understood that the purpose of all sessions, individual or family sessions, is for the benefit of your child. If you have unresolved feelings about your ex-spouse and your own adjustment to the divorce and visitation issues, these should be addressed wit your own therapist and not with me, your child's therapist.
- 6.) In the event that either or both parents become dissatisfied and decide to end their child's therapy, it is understood and agreed that it would be in the best interests of your child to schedule a final "goodbye" therapy session rather than being pulled abruptly out of therapy.

I understand and agree with the treatment conditions as stated above. I support the goal of this treatment as being for the best interests of my child. I understand that I the terms of this agreement are violated, my child's therapy may be damaged and may require termination.

Parent/Guardian: _____

Date: _____