

# FAMILY CHRISTIAN COUNSELING

## DISCLAIMER, RELEASE OF LIABILITY AND CONFIDENTIALITY

I understand that the FAMILY CHRISTIAN COUNSELING MINISTRY is a non-profit counseling ministry operating on a cost recovery basis only

I further state that I have voluntarily sought counseling on my own initiative. I am under no obligation to accept or reject any of the counseling that I may receive from counselors of the FAMILY CHRISTIAN COUNSELING MINISTRY

With the intent to bind my heirs, relatives, legal representatives and assigns, I expressly release and hold harmless the FAMILY CHRISTIAN COUNSELING MINISTRY, employees, and all other persons working with them on their behalf, from all liability, loss, damage, claims, actions or judgments of any kind which may arise in connection with the counseling which I have received or will receive.

All services received and all information obtained are kept confidential and cannot be released without your permission. You need to know however, that there are special situations under which confidential information could be revealed as such:

1. You or your legal guardian) sign a written release of confidential information, thus, giving your permission.
2. In the case of an emergency where a "Duty to Warn" and "Duty to Protect" ethic requires your counselor to break confidentiality when a danger exists to you or to someone else. (This includes suspected or confirmed reports of child/elderly or incapacitated adult abuse or neglect.)
3. Under very special circumstances, the court may subpoena your records, and may order a counselor to give testimony during a court hearing.

I have read this disclaimer and release of liability and understand it and have executed it as my free and voluntary act.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Witness Signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State and Zip)

\_\_\_\_\_  
(Home Telephone)

\_\_\_\_\_  
(Work Telephone)

(NOTE: IF THE PERSON SEEKING COUNSELING IS A MINOR (UNDER 18 YEARS OF AGE), THE ATTACHED DISCLAIMER AND RELEASE OF LIABILITY MUST BE SIGNED BY HIS/HER PARENT OR LEGAL GUARDIAN.)

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