



## **Glimmers of Hope Art Therapy/Counseling Policies**

1. For my first session, I will bring the completed intake form that I have printed from the Glimmers of Hope website. If I am not able to print it, Jessica will have a copy in her office for me to fill out.
2. The first session will involve reviewing the intake form, presenting issues, and setting goals. It is possible that no art therapy will be done in the first session, as Jessica will create specific art therapy directives based on my needs/ goals that I work with her to set.
3. If I arrive to my session early, I will wait in the car until my scheduled time. I can text Jessica at 2 minutes till my time, and she will open the door for me. If I am late, I will not have extra session time. If I do not show up at all, I will be charged the full session rate.
4. If I need to reschedule, I must do so at least 24 hours in advance, or I will be charged the full session rate (\$110/50 min individual session OR \$150/80 min family session).

5. I understand if I come to session under the influence of any substance, I will be asked to leave and reschedule for a more effective session.
6. I understand that Glimmers of Hope does not provide diagnoses and that Jessica does not accept, and therefore, does not bill insurance. If I let Jessica know I want to use my HSA/FSA card, she can provide me with a superbill so I can seek reimbursement from my insurance company. I understand I need to check before I use that form of payment, if my insurance covers art therapy and / or counseling.
7. I understand that if I see Jessica in public, she will not approach me to greet me to respect my dignity/maintain professional boundaries and not to be rude. Not acknowledging me prevents awkward questions from others about how she knows me, thus protecting my privacy. However, if I choose to greet her, I understand, she will respond warmly, but briefly.

I understand these policies are to help me get the most out of my session and provide a respectful art therapy practice to others.

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First and Last Name

Date