

**Group Therapy Agreement**

**Client name:** \_\_\_\_\_

This document represents an agreement between Group Therapy client (signed below) and Psychotherapist Jayson L. Graves of Healing for the Soul, LLC and his agents (“Therapist”).

By signing this agreement **initially as a visitor, you only agree to the confidentiality portion** herein; the agreement is activated in terms of commitment when payment is received.

The following represent the covenants for the group known as “Victory Teleconference Group,” by which all parties abide:

It is understood that the group is **confidential** and you give permission to Jayson and/or your HFTS group facilitator to consult with each other and their supervisors about your therapeutic issues and group involvement. Jayson Graves and his supervisors and agents also agree to protect a participants’ confidentiality. Exceptions to confidentiality occur with the following, in which case Jayson Graves or his agents would report such information to appropriate authorities:

- If you pose a serious physical danger to yourself or another person
- If you disclose information indicating threats to national security
- If you disclose that you or another person have physically or sexually abused or molested a child/minor, and incompetent person, or a disabled person
- If you disclose that a child, an incompetent person, or a disabled person is suffering from neglect
- Subpoenaed testimony in criminal court cases, and orders to divulge information by judges in child-custody and divorce court cases
- If criminal or delinquency proceedings occurred; if there is a legal or disciplinary proceeding regarding quality of services provided, or if services are being reviewed by a professional or legal entity

1. Client agrees to complete the 12 Steps: A Spiritual Journey and may “graduate” from group whenever fulfilled. Clients agrees to **complete and present each of the 12 steps individually to the group** and give Therapist 2-weeks notice before graduating from group. *This is the main commitment to the group. Premature departures are strictly prohibited and clients are asked to make every effort, regardless of circumstances to complete the workbook and finish sharing the steps before graduating out of group. Examples of unacceptable reasons for not fulfilling this Group Agreement:*
  - a. *“I have found local accountability and don’t need the group any longer.” [Local accountability augments group but is not a replacement for this group or this agreement].*
  - b. *“I’m not getting anything out of group.” [What you ‘receive’ from group is directly proportionate to what you invest].*
  - c. *“I can’t afford the fees at this time.” [This is a cost you must count at the time of commitment; since things change in life, you must bring this to Jayson’s attention so he can help you work this out].*
2. The discounted **fee for the group** (if you have more than one service through HFTS or more than one family members receiving services) is **\$89** (60:00) or **\$114** (90:00) per month. This is billed prior to the first group meeting for up to the first quarter and in quarterly increments thereafter (3 months up to \$267 or \$342 respectively) along with \$200 deposit, refunded upon valid graduation. Non-discounted rates (group only) are \$99 or \$129, respectively. (Monthly payment and budget plan options available upon request; fees and terms of this agreement subject to change—see HFTS website for the most current agreement).
3. If, for any reason, this commitment is broken prematurely (before finishing and presenting all 12 steps from the workbook), or client is dismissed for cause such as breach of confidentiality, lack of commitment, conduct detrimental to the group (as decided by Therapist), etc., client may be required to forfeit balance of current term and/or deposit.

Initials: \_\_\_\_\_

[Client’s printed name: \_\_\_\_\_ ]

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4. The groups are not “drop-in” style and therefore, **weekly attendance is expected** and maintained by all except in cases of family/work emergency (“something urgent and unplanned”), whereby the client will directly contact Therapist or a group member before the meeting. Repeated violations of attendance agreement may result in termination from the group without refund of balance and/or deposit.
5. **There are no refunds for missed meetings.**
6. Each week the client will receive quantitative and qualitative feedback from the other group members and will consider and apply this feedback appropriately as he progresses in The 12 Steps: A Spiritual Journey **workbook** which **must be purchased prior to the first meeting** (\$24, postage included).
7. Clients are welcome to continue after **completing the 12 steps** so long as they are active in their recovery and come to an agreement with therapist vis-à-vis material to be used post-completion of the initial workbook. This agreement shall govern any such continuation but is subject to change at any time.
8. Client must maintain a **minimum monthly commitment to therapy or coaching** with a HFTS staff member for the duration of their commitment. This may include Jayson Graves or a colleague at a frequency of **at least once per month**. If client chooses a therapist other than Jayson or an HFTS staff member, client agrees to sign a Release of Information form (see Resources/forms page of the HFTS website) allowing therapists to communicate with each other in order to serve client as a team.

***“By signing below, I acknowledge that I agree to and fully accept the above terms of this covenant (page 1 attached).”***

Client signature: \_\_\_\_\_ Print: \_\_\_\_\_

Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

***“By signing below, I acknowledge that I understand the terms of this agreement & will support my spouse to fulfill them completely.”***

Spouse signature (required unless single): \_\_\_\_\_

**[Please fax to (303)997-1441 along with Disclosure Statement (also on Resources/forms page of the HFTS website). Then email [info@healingforthesoul.org](mailto:info@healingforthesoul.org) or call the office at 719-590-7685 for teleconference call-in information].**