

Karla Austin, Ph.D.
Licensed Psychologist
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Agreement to Pay for Professional Services

I, the client (or person acting for the client), request that Karla Austin, Ph.D., Licensed Psychologist, provide professional services to me or to _____, who is my _____, and I agree to pay the fee of \$ _____ per session for these services.

I agree that this financial relationship with Dr. Austin will continue as long as Dr. Austin provides services or until I inform her in person or by certified mail, that I wish to end it. I agree to meet with Dr. Austin at least once before stopping therapy. I agree to pay for services provided to me (or this client) up until the time I end the relationship.

I agree that I am responsible for the charges for services provided by Dr. Austin to me (or this client), although other persons or insurance companies may make payments on my (or this client's) account.

If you have health insurance, please consider whether or not you want me to file claims with them. Please understand if I do, I have to share a diagnosis, and sometimes more information such as treatment plan details or answers regarding the nature of your concerns and level of any addictions. Feel free to ask questions prior to making this decision. If you do want me to file for you, please indicate your identifying insurance information below.

Financial Information

Do you have health insurance? _____ Do you wish to use it for counseling? _____

Insurance Company: _____ PPO HMO POS EAP ?

Name of policy: _____ ID# _____ Group# _____

Provider Phone# _____ Policy Holders Name: _____

Do you have out-of-network benefits? _____ Client's birthdate: _____

Signature of client (or person acting for client) Date

Printed name

I, Karla Austin, Ph.D., have discussed the issues above with the client (and/or the person acting for the client). My observations of the person's behavior and responses give me no reason to believe that this person is not fully competent to give informed and willing consent.

Karla Austin, Ph.D., Licensed Psychologist Date