Sue Powell

Registered Counsellor

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CLIENT INFORMATION

Personal details

Name & surname	
ID number	
Date of birth	
Address	
Phone	
Email	

Contact person (e.g. next of kin)

Name	
Phone	
Relationship	

History

Have you been for counselling before? If so, what for?	
Do you have a known physical or mental illness? If so, what?	
Are you on medication? If so, what for?	

Current experience

How would you describe your problem/s?	
What are you hoping to achieve through counselling?	
Is there anything else I should know?	
How did you hear about my practice?	

PAYMENT INFORMATION

Person responsible for payment (if not the client, please give all relevant details)

Name & surname	
Phone	
Emal	
Address	
Relationship	

Medical Aid details

Scheme & Plan	
Membership number	
Main member	
Main member ID	
Main member phone	

CLIENT INFORMED CONSENT

Welcome to Sue Powell Counselling practice! Thank you for considering taking this counselling journey with me, I hope you will find our time together helpful. Before we start, please know the following:

I offer 50-minute sessions, both in person and online, and clients can book their sessions online, or directly with me via email.

In any screening, assessment or counselling interventions, any personal information shared with me is confidential. I can only divulge your personal information with your explicit consent; or if required by a court of law, or if I think you are at risk of hurting yourself of someone else.

At times, I may need to consult with other professionals, and in some situations, I may need to refer you to another professional. This would also include a sharing of your personal information, and is always done in consultation with you, and with your best interests at heart.

I take notes in the sessions to help me best serve you, and these are securely stored, and only accessed by myself. If your sessions are online, please note that while all security measures are taken, there is a risk of electronic transmission of these conversations.

In terms of the Protection Of Personal Information Act No 4 of 2013, the very nature of counselling requires the sharing of personal information, and this information is processed during our conversations in order to direct counselling sessions. This is kept confidential, as explained above.

I ask clients to pay before their session, via EFT, using the bank details provided in the confirmation email after booking with me. My rates are on my website. I will provide an invoice at the end of the month, but do not claim from medical aid on my client's behalf.

There is a 24-hour cancellation policy, and the full fee will be required.

I have read and understood the above information, and agree to the terms of participation:

Signature		Date	