

Acknowledgement of Receipt of Notice of Privacy Practices

(Effective April 14, 2003)

I hereby acknowledge that I have received a copy of the Saint Louis Counseling Notice of Privacy Practices.

Signature of Client or Client's Representative

Date

PRINT Client or Representative Name

Relationship of Representative to Client

Client refused to sign Acknowledgement

Signature of Person Witnessing Refusal

Please print and complete the new client paperwork below and bring with you at the time of your appointment. If the new client paperwork is not completed and brought with you, you will be expected to arrive 30 minutes before your scheduled appointment time to complete. Any incomplete paperwork may cause a delay in your session time or result in the need to reschedule.