



Nancy Bothwell, EdD
Registered Psychotherapist, RMFT
Nancy Bothwell Psychotherapy Services

EMAIL and TEXT MESSAGING COMMUNICATION

I understand that **Nancy Bothwell Psychotherapy Services** occasionally sends and receives email and text messages from clients, usually when initiated by the client. I understand that I am solely responsible for the security of emails and text messages I send/receive and that **Nancy Bothwell Psychotherapy Services** is not responsible for a breach of privacy, confidentiality, or security for emails and text messages I send/receive. I understand that **Nancy Bothwell Psychotherapy Services** will not initiate contact through the use of text messages.

1. Name (Print): _____

I **do/do not** (circle) wish to make contact through the use of text messages.

I **do/do not** (circle) wish to make contact through the use of email.

I **do/do not** (circle) wish to receive a receipt via email.

I **do/do not** (circle) wish to password protect the email receipt.

I **do/do not** (circle) wish to receive email session reminders.

I **do/do not** (circle) wish to receive text session reminders.

The email address I wish to use for correspondence is (Please print clearly):

Signature: _____ Date: _____

_____ Date: _____

Nancy Bothwell, EdD, RP, RMFT

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