



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

FINANCIAL AGREEMENT & DISCLOSURE

In compliance with ethics and standards, I am required to disclose all billing and financial matters regarding psychotherapy services. As a client of **Nancy Bothwell Psychotherapy Services** you understand:

1. My current rate for providing psychotherapy services is \$128.32 per hour plus HST. A therapeutic hour is considered 50 minutes.
2. Services will be paid in full at the end of each session by cash, cheque, e-transfer, or credit card (VISA, MasterCard, American Express, Discovery).
3. Receipts will be provided for insurance or income tax purposes.
4. You are fully responsible for all aspects of extended health care insurance, Employee Assistance Program, and/or other forms of financial reimbursement available to you.
5. You will be billed \$65.00 plus HST for not providing a minimum of 24 hours notice of session cancellation. This outstanding balance will be paid prior to additional psychotherapy services being delivered. However, as Health Canada guidelines suggest you stay home when you are experiencing a fever, cough, or flu-like symptoms, please reschedule or consider a telephone session.
6. You will be billed \$65.00 for a missed session. This outstanding balance will be paid prior to additional psychotherapy services being delivered.
7. The cost of providing a basic written report to a third party is \$128.32 plus HST.
8. The cost of providing an extensive written report to a third party will be negotiated prior to the report being prepared.

Please feel free to discuss any questions or concerns you may have regarding the financial aspects of your psychotherapy services.

Name: _____

Date: _____

Name: _____

Date: _____

Date: _____

Nancy Bothwell, EdD, RP, RMFT

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