

# SERVICES AGREEMENT

## KATHY WAGNER COUNSELING SERVICES, LLC

111 Petrol Point Drive, Suite 102  
Peachtree City, GA 30269

Please read the following services agreement carefully. If there are any questions about this agreement, they can be discussed before therapy begins. Please initial and sign where indicated.

**APPOINTMENTS** – Sessions are 45 minutes long and your scheduled appointment has been reserved for you. If you cannot keep your scheduled appointment, please notify the office as soon as possible. Clients will be charged \$75 for cancellations made with less than 24 hours notice or if the session is missed due to a no-show.

Initial: \_\_\_\_\_

**FEES & INSURANCE** – The fee per session is \$175 and payment (or insurance co-payment) is required at the time of each visit. Returned checks will require an additional \$30 fee.

Initial: \_\_\_\_\_

**OUT OF OFFICE FEES** – The fee for “Out-of-Office” services, such as court appearances, is \$175 per hour with a 2-hour minimum. This must be paid in full, 24 hours prior to the appearance.

Initial: \_\_\_\_\_

**EMERGENCIES** – If a life-threatening emergency arises, please contact the nearest hospital emergency room or dial 911.

Initial: \_\_\_\_\_

Please sign this agreement indicating that you have read and understand the above information.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Kathy Wagner, LPC

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date