

New Client Form



Name: _____ Date of Birth: ____/____/____

Address: _____

Email: _____

Phone: (H) _____ (M) _____

Next of Kin Details: Name: _____

Address: _____

Phone: _____ Permission to Contact? Yes / No

Doctor: _____ Address: _____

GP Ph.: _____

Medicare Number: _____ Expiry: ____/____

Confidentiality

It is important that you know that what is discussed in therapy is confidential unless under the following circumstances. These limits are highlighted below:

- 1) The information given to the psychologist is subpoenaed by a court of law
- 2) Failure to disclose would place yourself or someone else at serious risk of harm
- 3) Approval has been given by you to provide written report to another professional/agency

Fees

Fees at EMDR Brisbane are charged at **\$215 per session** (50 minutes duration). Upon the receipt of a referral via a Mental Health Care Plan (MHCP) from GP, you will be able to claim a Medicare rebate of \$92.90 for up to 10 sessions per calendar year. If you are claiming a rebate under your private health insurance, a receipt for services can be requested at your appointment.

Cancellation Policy

24+ hours' notice is required for any cancellations otherwise a fee of \$100 will be charged. 'No shows' will be charged at the full rate.

I, _____, have read and understood the above New Client Form. I agree to the above conditions for the psychological service provided by EMDR Brisbane.

Signature _____ Date: _____