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(A Professional Corporation)
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Eating Disorder Recovery Process Group

Welcome to the Eating Disorder Recovery Process Group. I am pleased that you have made the decision to enroll in this group and I look forward to working with you in the weeks ahead.

Some information about the group:

1. This is an open process therapy group focusing on eating disorder recovery. The ongoing group will meet every Monday from 6-8pm unless otherwise specified.
2. The cost of each group session is \$35.00 payable at the time of service in cash, check or credit card.
3. Members of the group are expected to make an 8-week commitment to the group. You will benefit most by making this group a priority. Please arrive on time and leave when the group is finished. In the event you will not be attending a group session, you will need to provide a minimum of 24-hour notice or you will be charged for the session.
4. All information discussed or written within the context of group sessions is confidential. A member may want to discuss their experience with people close to them, but even in that case it is important not to use other members' names or specific information.

If at any time you are unhappy with the services that you are receiving, please discuss the matter with me.

I have read and understood the preceding information. I consent to receiving therapeutic services and agree to abide by the policies as stated above.

Client Signature

Date

Kirsten L. Christensen, MA, NCC, LPC

Date