



Equestrian Counseling Services

Informed Consent for Services: Horse Show Kids: Meeting the Challenges Weekly Support Group

I do hereby voluntarily seek and consent to take part in the weekly support group "Horse Show Kids: Meeting the Challenges" facilitated by ECS/Lisa Baugh, MA and acknowledge that she is a Licensed Marriage and Family Therapist in the State of Florida. I commit to putting forth my best effort in order to achieve the goals and objectives of the group. I understand that I may see Lisa in situations outside our support group but that the protection of my confidentiality is paramount, and that Lisa will not initiate conversation or discuss aspects of the group that would compromise my confidentiality or the confidentiality of any other member of the group.

I understand that the fee of \$25 is due at the start of each group session I choose to attend. In the event that I need to be contacted regarding the scheduling of the support group, the best numbers to reach me are:

(_____) _____ or (_____) _____

or by email at _____

Print Participant's Name Participant's Signature ____/____/____
Date of Birth

Print Guardian Name Guardian Signature ____/____/____
Today's Date

Address

Parent or Guardian must sign for all participants under 18. No one will be admitted into the group without a completed consent form.