



**CENTER FOR MINDFUL PSYCHOTHERAPY, Inc. (CMP)**

## **Informed Consent for In-Person Services: COVID-related**

*I hereby acknowledge that by consenting to receive in-person services with my therapist, mindful of the potential COVID risks associated with such in-person care.*

***By signing this form, Client understands and agrees:***

1. Therapist may require we meet via telehealth if either Therapist or Client experiences symptoms consistent with COVID or any risks, or it is in Therapist's professional judgement services provided via telehealth are necessary and clinically appropriate. By receiving in-person services with Therapist, Client assumes the risk of exposure to COVID. It is recommended that Client consult with their physician before attending in-person services.
2. Client agrees, that as a condition of receiving in-person services, they will take appropriate measures to minimize the possibility of exposure to Therapist (Therapist's staff, other patients, etc.). Client agrees and acknowledges agreement to each action:
  - Client will only keep an in-person appointment if they are free of any symptoms commonly associated with COVID.
  - Client will either cancel their in-person appointment or request an appointment via telehealth if they have been in contact with someone who has tested positive for COVID within the last 14 days.

Therapist may change the above precautions if there is a resurgence of COVID or if any changes to applicable guidelines change. Any changes will be discussed with Client as soon as practicable.

3. Client and therapist agree that they are complying with any outstanding or re-instated local COVID protocols and mandates.

4. Therapist has taken steps to reduce the chance of spreading COVID. Nevertheless, the risk of contracting COVID still exists.

Client agrees they have read the above and discussed any questions or concerns with Therapist.  
Client's e-signature shows agreement with the above terms and conditions.