

### 3. Informed Consent: Treatment of a Minor

#### Consent for Treatment of a Minor

(please acknowledge by checking below)

Manhattan Psychology Group (MPG) provides psychological services to children. These services may include one or more of the following: individual psychotherapy, individual sessions with either parent, joint parent-child sessions with either parent, joint sessions with the child and both parents, communication with a third party (e.g., physician, attorney, school), and/or review of school records.

Participation

I/we wish to be included in my/our child's treatment as needed and as feasible, by meeting with the provider, phone consultations, or other forms of communication.

Confidentiality

I am aware that the privilege of confidentiality remains with the legal guardian. All permission to a third party must be given by the parent/legal guardian. However, for the success of treatment, the confidences of my/our child may need to be maintained, and not all information may be revealed to me. However, in situations that might indicate imminent danger or harm to my child or another person, I understand that I will be notified immediately.

Litigation

I further understand that in order for my provider to function in their role as my/our child's therapist, they must be protected from inclusion in any court or future litigation. Also, they must be exempt from supplying reports to any attorney as to the content of the therapy and/or the emotional state of either the minor child or myself. To this end, I waive my rights to subpoena my provider from MPG and the records of his treatment of the minor child named above. I have the right to rescind this permission at any time by notifying MPG in writing.

Cooperation

I also understand that psychological treatment requires the cooperation of all parties, and that there is no guarantee that treatment will be successful.

Parent/Guardian Initials:

Date: