

Virginia Crist, Ph. D.
Licensed Marriage and Family Therapist
Lic.# MT 001168
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Boca Raton, FL 33432
561-212-6855

PROFESSIONAL SERVICES CONTRACT

The purpose of this contract is to clarify the nature of my fees and services as a licensed marriage and family therapist.

1. A typical session is 45 minutes in length, although longer sessions may be scheduled by mutual agreement. You will be informed of the office fee for all the services I provide in managing your treatment. The fee applies to, but is not limited to the following services: the therapy session, telephone calls, reviewing records, writing reports, conferring with other professionals regarding your treatment, and so on.
2. If your check does not clear, an additional charge of \$50.00 will be imposed. Regardless of your insurance coverage, all charges remain your responsibility. If your account is not paid in full within 30 days, an interest charge of 10% per month will be added to the unpaid balance. In the unlikely event that the services of an attorney and/or collection agency are used to collect any unpaid balance, their fees will be charged to your account.
3. Because continuity of treatment is an important part of therapy, I encourage you to keep your scheduled appointments. If you are unable to keep an appointment, please be sure to call my office at least 24 hours in advance. If you neglect to give 24-hour notice of cancellation, regardless of the reason, you will be responsible for the full appointment fee. Therefore, please plan ahead to avoid any last minute problems that could interfere with keeping your appointment. Please realize that if you fail to cancel 24 hours prior to your appointment, other people who could have benefited from therapy are denied accessibility to that time.
4. I will check for messages periodically throughout the business day. Please know that I will try to respond to your call as soon as possible. Messages received after 5 p.m. will be returned the following business day. **If your message is not returned in a timely manner and you require assistance, please call your primary care physician, 911 or go to your local hospital emergency room for assistance.**

5. Professional reports carry a charge for the time required to review records, do research, and compose the reports based on Dr. Crist's fee of \$300.00 per hour. A statement will accompany the report showing the charges and work done. 50% payment is due at the onset or agreement that Dr. Crist will undertake the report, and the final 50% is due at the time the client wishes to receive/take possession of the report.

6. All court related costs require a retainer of \$10,000.00 without exception, and include, but are not limited to the following:
 - 1) time
 - 2) reports and any other paperwork
 - 3) phone calls
 - 4) faxes, copies, mail, etc.
 - 5) transportation, i.e., gas, turnpike, etc.
 - 6) hearings, depositions and court appearances

Balance is due as determined by Dr. Crist. Please appreciate the expertise and extraordinary time commitment required for court cases. Thank you.

I congratulate you on your decision to enhance your well-being. I can assure you that I will have a sincere interest in your personal growth.

I understand and agree to the above terms.

_____	_____
Patient Signature	Date
_____	_____
Patient Signature	Date
_____	_____
Dr. Virginia Crist, Ph.D. Florida Lic. # LMFT MT1168	Date