

EquusTherapyWorks

Horses Changing Lives

Annette Crooks, B.B.A. Equine Specialist
Glinda Digiacinto, M.Ed., LPC

Corporate Inquiries: Annette Crooks @ 940-395-2556
Counseling Inquiries: Glinda Digiacinto @ 214-755-1185
Location: Aubrey, Texas

PROFESSIONAL DISCLOSURE STATEMENT

Qualifications: We have met all the requirements of the Equine Assisted Growth and Learning Association. EAGALA Certification means that we adhere to the highest standards of professionalism, practice and ethics. Annette is a certified experienced equine specialist and Glinda Digiacinto is a certified experienced mental health professional. See www.eagala.org for additional details.

INFORMED CONSENT

Some clients need only a few counseling sessions to achieve their goals; others may require a longer period of time. Equine-assisted counseling is typically shorter than other counseling techniques. In EAGALA model Equine-Assisted Psychotherapy (EAP), clients take part in ground activities with the horses. No prior experience with horses is needed. Experiences with the horses in EAGALA model EAP provide real opportunities for mirroring life which helps you quickly see the problems and find solutions that work.

Possible positive or negative effects of entering or not entering counseling, continuing or not continuing, and/or using or not using certain techniques may be discussed any time during the counseling relationship at the initiation of either you or one of us. You also have the right to refuse or negotiate modification of any of our suggestions that you believe might be harmful. As a client, you are in complete control and may end our counseling relationship at any time, though we do ask that you participate in a termination session.

Although our sessions may be very intimate psychologically, ours is a professional relationship rather than a social one. Our contact will be limited to counseling sessions you arrange with us except in case of emergency when you may contact us by phone. Please do not invite us to social gatherings, offer us gifts, ask us to write references for you, or ask us to relate to you in any way other than the professional context of our counseling sessions. You will be best served if our sessions concentrate exclusively on your concerns. You will learn a great deal about us as we work together during your counseling experience. However, it is important for you to remember that you are experiencing us in our professional roles only.

We assure you that our services will be rendered in a professional manner consistent with accepted ethical standards. Please note that it is impossible to guarantee any specific results regarding your counseling goals. However, together we will work to achieve the best possible results for you. Should you and/or we believe that a referral is needed we will provide some alternatives including programs and/or people who may be available to assist you.

Payment

The fee for a 1 hr. individual or family session is \$150.00. A 1 ½ hr. session costs \$175.00. The fee for a group session is \$100.00 and lasts for 2 hours. Customized seminars will be priced according to length and complexity. The fee for each session will be due and must be paid with cash, check, or through PayPal on our website prior to the beginning of each session. Checks should be made payable to Rendola Equine, LLC. We do not file for insurance reimbursement. A receipt is available upon request for possible reimbursement from your insurance company. In the event that you will not be able to keep an appointment, please notify us at least 24 hours in advance so we can schedule another client. If you do not notify us, you will be charged for your scheduled session. Likewise, if you intend to discontinue counseling, please inform us as soon as possible so that we may see another client on our waiting list. We hold our equine sessions regardless of weather. An indoor arena is available. Closed toed/heeled shoes are required. No sandals. Dress according to the weather.

Records and Confidentiality

All of our communication becomes part of the clinical record which is accessible to you on request. Be aware that there are certain tests and materials that are copyrighted, trademarked, or proprietary that cannot be disclosed. We will keep confidential anything you say to us, with the following exceptions: a) you direct us to tell someone else, b) we determine that you are a danger to yourself or others, or c) we are ordered by a court to disclose information.

By your signature below, you are indicating that you have read and understood this statement, and/or that any questions you have had about this statement have been answered to your satisfaction.

Minor

Counseling is requested for a minor child _____

Both parents' signatures are required below.

Client or Parent Signature _____ Date _____

Client or Parent Signature _____ Date _____

Equine Specialist _____ Date _____

Mental Health Professional _____ Date _____

