



BTG Client Essential Information Form

- ** Your sessions will end 50 minutes from the top of the hour. Next appointments are normally made in the therapist office at this time.
- ** You will be contacted (by survey) 3-4 weeks after your first appointment to make sure that you are getting service with a therapist who is effective for you. You can request a conversation earlier or at any time during the course of your treatment. Call the Client Care department.
- ** If you late cancel (less than 24-48 hours) you will be charged the total cost of the session. We will make one exception per year to allow for emergencies. Your one free late cancel starts over every January.
- ** If you need to cancel an appointment outside of normal office hours, please call 217-398-9066 and leave a confidential voice mail that includes your name, your therapist; why you're canceling and a good phone number to reach you to reschedule.
- ** If you no-show you will be charged the total cost of the session. No exceptions.
- ** Payment is expected at time of service.
- ** If your insurance or financial situation changes and you still desire therapy but can't afford it, please ask to talk to the Business Manager.
- ** Bathrooms are at the end of each hall. Unisex on the west. Women's on the east.
- ** We ask that parents/guardians of children 16 and under to remain in the building during their child's appointment. Children under 12 cannot be left alone in the waiting room.
- ** WIFI is available in our waiting room. The password to use is "309Clark"
- ** It is not our policy for our therapists to return client phone calls or answer email, so please do not rely on this method of communication and expect a reply. We are not a crisis center and so they are not available outside of appointments. You can call to request an earlier appointment with your therapist or a "first available" therapist; or call the Crisis line at 217-359-4141 or call 911.
- ** We follow legal protocol with regard to service animals. Non-service animals will not be permitted due to concerns about other client's potential anxiety regarding animals.



I have received, read and understand the "BTG Essential Client Information" form

Client Name Printed (guardian's name if client is under 12)

Client Signature (guardian's if client is under 12) _____
Date

Therapist Signature _____
Date