

Notice of Recordings

Counseling sessions are routinely audiotaped in many treatment and training settings, but counselors must obtain a client's permission prior to turning on any recording device. We have the highest regard for the safety of our clients and their confidentiality and will not proceed in recording any session without your prior knowledge and consent.

In addition, we do not consent to clients recording any session during the time of treatment. If you would like to have your session recorded, please address the issue with your therapist and make arrangements.

I, _____, assert that I will not record my therapy sessions during treatment. I also understand that my therapist will inform me of a session being recorded and will obtain written consent prior to recording a session. I understand that I have the right to deny any audio or video recording and I have the right to revoke any prior consent for an audio or video recording.

I have read and fully understand the information contained in this Notice of Recordings Document and I consent to having my sessions recorded.

Client Signature

Date

Parent or Representative Signature (relationship)

Date