



Life In Motion

Counseling

www.LifeInMotionKentucky.com

Melissa.Smith@LifeInMotionKentucky.com

502.257.5576

This is a co-parenting agreement that has either been initiated by the parents or the court. This will explain the process and the expectations of co-parenting counseling and the child(ren) involved.

The session fee is \$120. This will include sessions with the parents and/or the child(ren), depending upon the treatment goals.

Payment is expected before the start of each session. Unless otherwise court-ordered, the fee is to be collected from the parent attending the session with the child(ren). It is the responsibility of the attending parent to collect their court-ordered portion of the fees from the non-attending parent.

I will send both parents a receipt of payment after each session for your individual records.

Due to the nature of co-parenting if payment is not made before the session we will have to reschedule the appointment for a time payment can be made. There cannot be a negative balance on the account.

I take cash, FSA, and credit cards. No personal checks.

I will also advise the Honorable Judge _____ in Family court _____ of the financial arrangements set forth here. This financial arrangement may or may not become part of a court order in the future. This is at the discretion of the judge.

Session frequency is weekly unless other arrangements have been made. This will include an assessment for each child and each parent. The assessments will be done before treatment goals are established.

Due to the nature of counseling and confidentiality, I will not disclose what the children and I discuss in our sessions unless I fear for their safety or the safety of others. I will also not discuss what is said in either parent's sessions. This includes with your attorneys or the court.

The limitations to confidentiality are as follows: I feel the client, including the parents, are going to harm themselves, harm someone else, there is a crime that has been committed against the child(ren), or if there is a court order **signed by the judge**.

The intention of this type of counseling **is not to evaluate court custody arrangements**. The intent of this counseling is to help the child deal with adjustment issues and assist both parents in parenting the child in common while reducing damaging conflict. The nature of counseling is such that the trust the child places in me must be protected and not violated. For this reason, **I will not advise the court on custody placement**. If this is your desire, please consult a custody evaluator. The court can appoint you one.

In order for co-parenting counseling to work both parents must respect the counseling process. This includes respecting the other parent at all times.

By signing this agreement you agree that there shall be no verbal or physical altercations and that you shall not place the child(ren) in the middle of parental disagreements.

You also agree that either parent shall not make unkind or disparaging remarks about the other parent while you have physical custody of the child(ren) even if you think they are not able to overhear.

Both parties shall abide by this agreement

Name of parent 1

Date

Signature

Name of parent 2

Date

Signature

Therapist/Life In Motion Staff

Date

