

Consent for Counseling Services to Minors

In order for minor children/adolescents to receive psychological services, it is necessary for the legal guardian to grant permission for such services to occur.

Names and date of birth of child(ren) to receive psychological services:

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name of person requesting services _____

Your relationship to child/adolescent: Parent Stepparent Guardian Grandparent Other

Are you the legal custodian to above-named child/adolescent? Yes No

I hereby swear that I have a legal right to obtain treatment for the above-named children/adolescents.
Yes No

In instances of divorce it is essential that the legal custodian of the child/adolescent grant permission for the services. If you are a divorced parent, a stepparent, a grandparent, a guardian, or other, you may be asked to provide a copy of the court order which names you the legal custodian of the above children/adolescents.

Are you willing to do so? Yes No

If the answer to any of the above questions is "No", counseling services can not be Provided to the above-named children/adolescents until a copy of the court order which names you the legal custodian is provided to this office.

I, _____, consent to _____

of Drennan & Associates Christian Counseling to provide psychological services to the children/adolescents named above.

Signature of person authorizing consent

Date