

**LISA SPURLING, LCMHC
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DISCLAIMER AND CONSENT

By providing you with a copy of this disclaimer, my goal is to ensure that you fully understand the services I provide. I provide coaching services for individuals who have accumulated extensive belongings and are struggling with how to stop over-collecting and clear clutter from their homes. My goal is to educate you and support you by learning what your needs are and determining how to most effectively assist you so that you can remove any clutter from your home should you wish to do so. Although I am a licensed clinical mental health counselor in the State of New Hampshire, I am not providing you with mental health services and am not acting in my capacity as a licensed clinical mental health counselor. My role as a coach is also entirely unrelated to my work at Whole Life Health Care as a licensed clinical mental health counselor. I am also not an alterative provider. If you are seeking someone to provide mental health services or alternative care, please let me know and I can refer you to an appropriate individual. If, in the course of providing services to you, I determine that it you would benefit from obtaining mental health services, I will provide you with referrals to take into consideration. In addition, if I can identify individuals who you can hire to assist you with the removal of items from your home, I will do so.

By agreeing to hire me to provide coaching services to you, you are authorizing me to meet with you in your home in order to observe your clutter and determine steps you can take to address the clutter. In the course of supporting your efforts to identify and remove items from your home, you may make the decision to actually remove certain items from your home. It is

important to understand that while I can provide support of your efforts, it is entirely your decision about what to remove, and when to remove any such items. I provide support and can offer suggestions about steps to take, but in no way are you obligated to agree with my suggestions. Because any actions you take are entirely your decision, I will not be liable in any way for any actions you take should you subsequently decide that you regret taking any such actions.

In addition, it is important that you understand that because I am not providing mental health services to you, the work we do is not protected by therapist-patient privilege. However, I take my clients' privacy very seriously. I will take appropriate steps to ensure that your work with me, and any paperwork generated by me as a result of that work, remains confidential.

My hourly rate for providing coaching services is \$125 with a two hour minimum each visit. Please be aware that because I am not providing mental health services, my services will not be covered by insurance. Payment is due at time of service by cash check or credit card. Please let me know if you have any questions after reviewing this disclaimer. By signing below you indicate that you understand this disclaimer and consent form and are willing to accept my services as described above.

Date

Signature