



Mighty Oaks Counseling, PLLC
Family Enrichment and Play Therapy Center

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WAIVER

The following business practices, though not all-inclusive, may constitute a potential risk to your confidentiality, in spite of the security measures that I have in place to protect your privacy. By signing below, you understand and acknowledge the possible risk and your consent for such practices to be utilized.

- Use of an electronic calendar
- Use of a paper calendar
- Use of a cell phone for communication with you and other professionals
- Use of a laptop computer
- Use of unencrypted email
- Use of shared office space with the independent practices of other mental health professionals with potential access to, among other things, common storage and file space, mailboxes, voicemail, and messages.

Printed Name(s)

Signature—Client/Parent

Date

Signature—Client/Parent

Date