Acknowledgement of Receipt of Policies and Informed Consent for Treatment

I understand that Lindsey Knott, Ph.D., is a licensed psychologist in the state of Texas, license #38291. Dr. Knott's Office Policies and Informed Consent for Treatment describes:

- Qualifications Emails, Phone Calls, and Emergencies
- The Process of Therapy/Evaluation Cancelation and Lateness
- Termination Payment and Financial Arrangements
- Dual Relationships Confidentiality
- Benefits & Risks of Psychotherapy Complaints

Dr. Knott's Social Medial Policy covers:

- Friending Business Review Sites
- Interacting Location-Based Services
- Use of Search Engines Email
- Google Reader

I acknowledge the receipt of both Dr. Knott's Office Policies and Informed Consent for Treatment and Social Media Policy. My signature below indicates I have read, discussed, and understand these policies, and I agree to comply with the content therein. I understand that these policies are available to me on Dr. Knott's website but that I may always request a hard copy if I am unable to access them. I am aware that I am encouraged to ask further questions as needed.

Client's Printed Name	
Client's Signature	Date
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Lindsey Knott, Ph.D., TX Licensed Psychologist #38291	Date

Lindsey Knott, Ph.D., Email: dr.lindsey@lifeworthlivingpsychotherapy.com

Website: lifeworthlivingpsychotherapy.com