

Gina Campbell, LISW, MDiv

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**CONSENT TO CORRESPOND
ELECTRONICALLY**

While Gina Campbell Counseling, LLC (GCC) takes reasonable precautions to protect your confidential information, e-mail, texting & social networking is not a completely secure method of communication.

I acknowledge that if I use electronic mail to authorize or initiate contact with GCC regarding my therapeutic care, the GCC and/or his/her representative has my permission to correspond via that email address and other forms of electronic communications.

I give permission for a clinical staff member to email me regarding my therapeutic care at

_____ @ _____

The purpose of e-mail and other forms of electronic communication is to communicate with the client regarding scheduling appointments, reminding clients regarding their appointments, homework assignments, follow-up care according to staff or information regarding the clients' business account. Electronic communication is not a way of communicating new information regarding care or of communicating emergency treatment. You must call and talk to your individual therapist regarding any information towards your treatment at GCC.

If you are in an emergency situation and need to contact someone immediately to help you, you may call your individual therapist and/or these following numbers:

Unity Point Behavioral and Mental Health	(515) 263-5249
Mercy Behavioral Health	(515) 271-6111
Broadlawns Medical Center Crisis Team	(515) 282-5752
Emergency Services:	911

I give GCC my permission to add my e-mail address for the purpose of sending me notices of future events and other pertinent information through my e-mail.

Client/Guardian Signature

Date

Client / Guardian Printed Name*

Date

*If patient is a minor (under the age of 18), form must be signed by a parent or legal guardian.