

# Perry Sage Therapy

Licensed Marriage and Family Therapist, LF60735148

Please take the time to carefully read the following information.

As a Licensed Marriage and Family Therapist in the State of Washington, I am required to provide clients with the following information disclosure in accordance with chapter 18.19 RCW prior to counseling. A brochure published by the Department of Health for your information is available upon request.

As a consumer of counseling services, it is important that you are aware of your rights as indicated by Washington State law. Counselors practicing counseling for a fee must be registered or licensed with the department of licensing for the protection of the public health and safety. Registration or licensure of an individual with the department does not include recognition of any practice standards, nor necessarily imply the effectiveness of any treatment.

You have the right to refuse treatment, and the responsibility for choosing the counselor who best suits your needs and purposes. You are entitled to have information about your counselor's education and training.

Clinician/Specialist name and job title:	Perry Sage, LMFT: Family, Child, and Adult Therapist
Registration, certification, or license number:	Licensed Marriage and Family Therapist License #: MFT.LF.60735148
Degree, education, and training:	M.A. in Marriage, Couple, and Family Therapy
Experience:	4 years
Therapeutic orientation:	Strength-Based + Client-Centered Systems Theory Play Therapy CBT + Trauma Focused CBT Dialectical Behavioral Therapy
In office:	Saturday 8am-6pm
Phone number:	Perry's office: 425-442-6346

By signing below, I indicate that I have received a copy of this disclosure statement.

\_\_\_\_\_  
Client signature (parent/guardian if under 13)

\_\_\_\_\_  
Date