



**Walter A. McGerry, MA, LMFT, LMHC**

---

**13245 6<sup>th</sup> Ave N.W., Seattle, WA 98177  
206-364-8315, waltermcgerry@comcast.net**

**OFFICE POLICY/DISCLOSURE STATEMENT**

Through deeply held respect, careful attention to and interest in your dreams, concerns and the things you bring up, I intend to help you experience yourself more deeply and with more awareness. The answers to your direction in life lie within you. I will ask you to engage in a search for these inner answers with my assistance.

Our first two sessions are an opportunity for you to get a feel for how I work and for me to get to know you, why you are coming to see me, and what your situation is. At our third meeting I will give my recommendations and we will discuss what you want to do.

If we work together, this will most usually take the form of a fifty-minute session, once a week. We may arrange more frequent visits, if this is appropriate to your situation.

Though I have a wide range of training and experience in humanistic, transpersonal and psychoanalytically informed psychotherapy, my work is grounded most specifically in a classical Jungian approach. The basic concern is with the evolution of personality toward wholeness, but also the importance of your experience in and contribution to family, community and society.

I have over thirty years experience in therapy. I am licensed by the state of Washington to provide mental health counseling and marriage and family therapy.

Please feel free to ask any questions that may arise concerning my approach to therapy and any other concerns you may have regarding our work together.

**SCHEDULING, CANCELLATIONS AND FEES:** Sessions are 50 minutes long. Payment is expected at the beginning of each session unless other arrangements have been made in advance. Fees will be determined prior to the initial session and may vary based on my perception of current going rates.

**If you cancel or miss a scheduled session with 24 hours notice or less, you will be charged for that session.**

**If you have a scheduled appointment or regular time slot and cancel with at least 24 hours notice you will be charged half the fee.**

There are two exceptions, as follows: 1) We are able to reschedule your appointment within the normal interval before your next appointment, or 2) I am able to schedule someone else during your cancelled appointment. In these two cases you will not be charged for the cancellation. Insurance does not cover these charges.

**PHONE CALLS:** My telephone is answered by voice mail 24 hours a day. When leaving a message, please indicate several times that you can be reached. I will return your call as soon as possible. However, if you are in emotional crisis and

need immediate help, please call the 24-hour crisis line at 206-461-3222, toll free at 866-4-CRISIS or via their TDD line at 206-461-3219.

**You have a right to confidentiality.** I will hold all information about you strictly confidential whenever possible. Following are the exceptions to confidentiality as defined by Washington State law:

(1) With your written consent or, in the case of death or disability, your personal representative, other person authorized to sue, or the beneficiary of an insurance policy on your life, health, or physical condition; (2) I am not required to treat as confidential a communication that reveals the contemplation or commission of a crime or harmful act; (3) If you are a minor, and the information acquired by me indicates that you were the victim or subject of a crime, I may testify fully upon any examination, trial, or other proceeding in which the commission of the crime is the subject of the inquiry; (4) If you waive the privilege by bringing charges against me; (5) In response to a subpoena from a court of law or the secretary. The secretary may subpoena only records related to a complaint or report under chapter 18.130 RCW; or (6) As required under chapter 26.44 RCW, (Abuse of Children).

You have the right to choose a counselor who best suits your needs and purposes.

**Please, remember this is a residential neighborhood.**

In consideration of our neighbors,

- 1) Please use parking in front of our house when possible
- 2) When that isn't available, park across the street in front of the very tall laurel hedge.
- 3) As a last resort, if you do park directly across the street, please do so at one end of the parking strip rather than in the middle
- 4) Help us show respect for our neighbors by driving slowly on our block.**



If you have any questions or concerns regarding the above information, please discuss them with me. Thank you.

Fee per fifty-minute session \$135.00 (date) \_\_\_\_\_.

I, \_\_\_\_\_, have read and understand the above  
*Client name*  
policy & disclosure statements.

\_\_\_\_\_ client signature \_\_\_\_\_ today's date

\_\_\_\_\_ therapist signature \_\_\_\_\_ today's date

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Work # \_\_\_\_\_ Cell# \_\_\_\_\_ Home # \_\_\_\_\_

Email address \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

Emergency Name & Phone# \_\_\_\_\_

REFERRED BY: \_\_\_\_\_ PHONE: \_\_\_\_\_