

***Real Life Counseling, LLC***  
***"Real People Helping Others Experience the Real Life"***

**GENERAL INFORMATION**

Counseling services are offered as a service of Real Life Counseling Services. The following information will help answer questions about the services we provide.

**Counseling Staff**

***Dr. Samuel Sierra, D. Min., BCPC***  
Director of Counseling  
Board Certified Pastoral Counselor

***Diana C. Sierra, LMSW***  
Assistant Director of Counseling  
Licensed Master Social Worker  
Youth and Family Issues

**Initial Intake Appointment**

Your first appointment will be an opportunity for your counselor to hear from you present your needs, gather information, explain the counseling process, and set the fee for future appointments. This will also be an opportunity for you to discuss with the counselor your goals for counseling and subsequent appointments.

**Length of Counseling**

Each counseling session will be **50 minutes**. Length of counseling (duration that you are in counseling) will depend on the nature of the problem you are addressing.

**Fees**

If you are unable to pay this fee, please discuss this with your counselor for alternative solutions, as it is our desire to minister to your needs.

Real Life Counseling Service is a Cash or Check Only service. We will provide a Receipt for you to Submit to your Insurance Company. Please make checks payable to "**Real Life Counseling, LLC**" and write **Counseling Services** in the memo line. Payment is due after each session.

Please note that this fee is not a charitable contribution and cannot be claimed on your taxes as such.

**Insurance**

We do not file insurance claims. We will give you a receipt for the service you have received.

**No Shows and Cancellations**

We set aside the counseling hour for you. Unlike doctors, we do not double book that time. Therefore, we ask that you cancel your appointment at least 24 hours in advance so that we can schedule that time for another person. Please call your counselor directly to cancel your appointment. **You will be charged your normal fee if you fail to notify us 24 hours in advance. Also you will be charged for not showing up to your appointment.**

**I have read the information and discussed it with the counselor.**

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**Signed**

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**Date**