

Jack Singer, Ph.D.

Licensed Clinical Psychologist, Sports Psychologist, Marriage, Family & Relationship Therapist

INFORMED CONSENT FOR TELEPHONE/SKYPE THERAPY

I understand that because of the geographical distance between us, my therapy sessions with Dr. Jack Singer will take place on the telephone or on Skype. Dr. Singer has explained that there is much research showing that telephone/Skype therapy sessions are very effective means of resolving personal and sports issues. I agree to engage in telephone/Skype sessions with Dr. Singer and I understand that they may not be reimbursable by my insurance company.

Signed: _____ Date: _____

Printed Name: _____

**PLEASE FAX, ALONG WITH THE CLIENT FORM, TO DR. SINGER AT
(949) 481-5027**