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Counseling & Relationship Institute

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Court Appearances and Attorney Consultation Policies/Fees

If you request that your therapist meet with your attorney, and or make a court appearance on your behalf (or if an appearance is required by subpoena) your therapist may be required to clear the entire appointment calendar for that day or for a block of time. To accommodate your need for the therapist's appearance and testimony, and to adequately prepare and review any necessary documents and records for either a consultation or an appearance, the following guidelines apply:

- Scheduling a court appearance must be done at least one week in advance of the court date, and payment for the minimum charge (below) is due at the time of booking.
- For your therapist to meet with your attorney at our office schedule a regular session time (50 minutes). To arrange for your therapist to meet at your attorney's office, a prior appointment must be made, and therapist fees include travel time to and from our office.
- Fees for an appearance or a consultation with therapist are \$400 per hour, including travel, waiting for court, meeting with your attorney, and/or actual testimony time.
- There is a minimum fee of 4 hours (\$1,600.00) required for any court testimony or appearance of a therapist, regardless of the actual time spent, or if the case is cancelled or postponed when the therapist arrives in court/attorney's office.
- The fee to block an entire day of the therapist's time from 8:00 a.m. to 6:00 p.m. is \$4,500.00.
- Unless you have the therapist block an entire day for court appearance, your therapist will estimate an amount of time reasonable to accomplish the court appearance you are requesting. If your case is postponed or delayed on the day of appearance, and you have not guaranteed your therapist's presence for the entire day, the therapist will only be available for the estimated time.
- If the court appearance is cancelled less than four (4) days prior to the appearance, the minimum fee of 4 hours will apply.

My signature below indicates I understand and accept these policies and fees that will be charged.

Signature of Client

Date

Signature of Client

Date