



Hawthorn Counseling Group

977 Lakeview Parkway, Suite 102, Vernon Hills, IL 60061

(847) 680-0755

● www.hawthorncounseling.com

Collaborative Divorce Client Registration Packet

Welcome to Hawthorn Counseling Group. Completing the registration packet is the first step towards getting the help you are seeking and we look forward to working with you to achieve your goals for counseling. Please note the following about the attached forms:

- ✓ Each party is to complete a separate packet of forms and return to Dr. Jochem.
- ✓ Please complete the client registration form.
- ✓ Please complete the Collaborative Divorce Retainer Agreement.
- ✓ All clients are asked to complete the attached *Payment Agreement*. Please provide credit card billing information. As explained on the form, you may use cash or check to pay for services provided however your credit card may be utilized for collection of unpaid balances resulting from deductibles, copays, late cancellation or failed appointment charges.

Please pay special attention to our policies regarding late cancellations or failed appointments:

- If you need to reschedule an appointment, Hawthorn Counseling Group requires at least 24 hours' notice—a full business day in advance of the hour of your appointment—giving notice of the intent to cancel a scheduled appointment. Also, please note: appointments scheduled on Mondays (or Tuesdays if following a holiday weekend) must be canceled by 5:00pm the preceding Friday afternoon. If you have a scheduling conflict and must cancel an appointment it is sufficient to leave a voicemail message in your specific clinician's voicemail box by calling 847-680-0755, then entering the mailbox extension for your HCG clinician. This notification must be provided a full 24 hours (or one business day) in advance of the hour of the scheduled appointment in order to avoid being billed for the appointment. We are unable to make allowances or exceptions to this policy, except in cases of sudden serious illness, family emergency or severe inclement weather. Be advised that business/work conflicts, scheduling of kids' athletic or school events, unexpected travel or other similar circumstances which might arise are not deemed as grounds for waiver of the late cancellation policy.
- With regard to late cancellations or failed appointments, you will be charged the full usual and customary fee for one hour of scheduled service.



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CLIENT REGISTRATION INFORMATION

PLEASE PRINT

<i>Client Information</i>					
Last Name	First Name	MI	Date of Birth / /	Age	Sex
Address		Apt. #	City	State	Zip
Home Phone	Work Phone		Cell Phone		



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PAYMENT AGREEMENT

Patient Name: _____

In consideration of the services to be rendered by the clinicians of Hawthorn Counseling Group (HCG), I agree to pay HCG for all services provided to the patient, at the established rates listed in the HCG fee schedule in effect at the time services are received, or as otherwise negotiated with HCG.

I also understand that I am financially responsible for any failed appointment & late cancellation charges.

I certify that the information provided to HCG is, to the best of my knowledge, complete and accurate. I will make arrangements for prompt and regular payment of fees to HCG for services. I understand that payment is due either in-full or in-part at the time services are provided, as arranged when services are initiated.

I understand that I may pay by cash or check. I grant permission to HCG to bill my credit card account or flex spending account noted below for payment of any charges. This includes payment of any unpaid balances which are 30 days or more past due, including co-payments, deductibles, failed appointment & late cancellation charges.

In understand that credit card charges will show on billing statements as "Hawthorn Counseling Group".

All patients are asked to provide credit card billing information below:

TYPE OF CREDIT CARD: VISA M/C FLEX SPENDING ACCOUNT DEBIT CARD

NAME OF CARD HOLDER:

PRINT

ACCOUNT NUMBER:

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EXPIRATION DATE:

--	--	--	--

AGREEMENT AND AUTHORIZING SIGNATURE:

X _____



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977 Lakeview Parkway, Suite 102, Vernon Hills, IL 60061

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● fax: (847) 573-1617

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AGREEMENT TO ENGAGE A DIVORCE COACH / CHILD SPECIALIST

We are pleased that you have contacted Hawthorn Counseling Group (HCG) to assist you during your collaborative divorce or mediation process. The following information is provided to ensure that all parties understand the divorce process and the role of the divorce coach and/or child specialist.

For the purposes of this agreement, “coach” or “child specialist” refers to the Hawthorn Counseling Group (HCG) professional who is being retained to provide professional services to you during your divorce proceedings. . “Parties” refers to the clients—the participants in the divorce—who wish to retain HCG for the purpose of receiving divorce coaching or child specialist services. References to members of the “divorce team” refer to the attorneys representing both parties, a financial professional (if applicable), other mental health providers or any other professionals or mediator serving as team members for your divorce.

In the event that HCG is providing divorce coaching services to only one party in the divorce proceeding (a two-coach model, where both parties have an individual coach) we ask that you review the information contained in this agreement and indicate your understanding and agreement by signing below. If HCG is providing professional services to both parties of the divorce (a one-coach model) we ask that both parties independently review the information contained in this agreement and indicate their understanding and agreement by signing below, each party separately signing and returning this agreement.

I, _____, request that Hawthorn Counseling Group provide services to me as a divorce coach and/or child specialist.

Role of Coach and/or Child Specialist in the Divorce Process

I understand that a divorce coach is not providing psychotherapy. Instead, the coach functions as a short-term, time-limited source of education, emotional support, and guidance through the divorce process. The divorce coach does not conduct a diagnostic evaluation, classify a disorder or provide treatment. Instead, the coach facilitates communication between the parties engaged in the divorce process and other members of the divorce team. The coach provides assistance to identify and prioritize concerns and issues, reduces misunderstanding and conflict, seeks to facilitate problem-solving and effective resolution of the issues and may help to develop an appropriate parenting plan and effective co-parenting skills.

With respect to the child specialist role, I understand that a child specialist is not providing psychotherapy. Instead, the child specialist meets with both parents and the children to collect information, drawing upon experience and knowledge about children, child development and parenting strategies which have been shown to promote a healthy adjustment to divorce. The overall goal is to provide information to the parents and the team to help develop an effective parenting and co-parenting plan. The child specialist will also provide the children an opportunity to voice concerns regarding the divorce and provide the parents with information and guidance to help the children through this life transition.

I understand that, whether functioning in the role of coach or child specialist in the divorce process, no legal or financial advice will be provided by a Hawthorn Counseling Group clinician to either party engaged in the divorce process.

Communications and Confidentiality

With this divorce coach/child specialist agreement I am granting consent to HCG to exchange information as noted below:

- My coach or child specialist may release & exchange written and verbal information with the professionals involved in my divorce case. Specifically, this consent applies to all professionals listed on my collaborative divorce participation agreement or who have been retained to participate in my mediation process. I grant consent for the exchange of written and verbal information to the other party engaged in my divorce process, both parties' attorneys, any other coach/child specialist and any consulting financial professional involved in my case. "Written information" includes email communications, which are often copied with other members of the divorce team, including both parties seeking the divorce.

- The nature of the verbal and/or written information to be released or reciprocally exchanged includes, but may not be limited to: descriptions of coaching services provided to support my participation in the divorce process, descriptions of needs/interests as related to the divorce process and scheduling/billing information.
- The purpose of the release & exchange of information is to permit coordination of services during the divorce process.
- The consequence of refusal to grant consent is the inability of the HCG clinician to communicate with others involved in my case, including both professionals and the other party to my case.
- This consent to release & exchange information may be rescinded at any time. I understand that HCG will honor my request to limit the scope of information disclosed, so long as this limited scope does not interfere with my good faith participation in the collaborative divorce or mediation process.
- This consent to release & exchange information is valid until the conclusion of my divorce case. The case is considered to be concluded either upon final court approval of the marital settlement and joint parenting agreements or upon my written notification of intent to withdraw from the divorce proceedings.
- Disclosure of information to parties outside of the divorce requires my written consent.

There are exceptions to confidentiality. These include the following circumstances:

1. If the coach/child specialist has cause for concern regarding an imminent risk of harm to anyone inside or outside the divorce process the coach/child specialist may take steps to prevent such actions, including sharing information with other healthcare providers and/or other personnel in the service of preventing such harm.
2. If the coach/child specialist becomes aware of suspected child abuse or elder abuse, the coach/child specialist has a professional mandatory reporting responsibility to report specific information to authorities/agencies designated under state law.

Voluntary Process

I understand that divorce is a voluntary process and that my commitment to the process is essential to its success. I agree to act in good faith throughout the process.

Termination of Coaching or Child Specialist Services

Either party who has retained the professional team may decline to continue the process at any time. In that event, the party agrees to immediately inform the other party, both coaches, child specialist, and both attorneys, in writing.

The coach or child specialist may also withdraw from the case if either party engages in conduct contrary to the divorce process.

All information obtained or developed during the course my divorce case will remain confidential and may not be used in any subsequent legal proceeding or custody evaluation. I understand that if my divorce process ends before resolution and the parties elect to go to court, my HCG coach/child specialist will not be available to either party as a provider of mental health services nor as an expert regarding child custody issues. I agree that my HCG coach/child specialist will not be called upon to release information nor to testify regarding this divorce case in any subsequent legal proceeding. I understand that my HCG divorce coach/child specialist will not willingly testify in any subsequent court proceeding related to my divorce.

During the divorce process, and after its termination, neither the coach or child specialist will be available to provide other mental health services to the parties or their children. However, the coach or child specialist may assist in providing appropriate referrals for additional mental health care as indicated.

Fees & Billing

HCG asks for a retainer of \$2,000.00 for divorce coaching and/or child specialist services. Instead of retainer, services will be charged, billed and paid by the client via credit card on file. These services will be billed against the retainer to the credit card on file at the hourly rate in effect on the HCG fee schedule, or prorated increments thereof. The retainer will be applied towards coaching/child specialist sessions, meetings with the divorce team, telephone conferences/coaching with the parties, telephonic case conferences with other members of the divorce team, document drafting (of greater than 15 minute duration), document review (of greater than 15 minute duration) and door-to-door travel time from the offices of Hawthorn Counseling Group to locations where services are provided.

To facilitate continuity of service, retainer replenishment will be requested should a retainer balance approach depletion.

HCG will provide an itemized statement of all services rendered and will refund any unused portion of the retainer at any time, either upon request or upon conclusion of the case.

I understand that HCG asks that 24 hour (1 business day) notice is provided when canceling a schedule coaching or child specialist appointment. Appointments canceled with less than 24 hour notice, or failure to keep a scheduled a scheduled appointment, will result in being billed for one hour of service. Exceptions are provided for sudden illness in oneself or a family member, inclement weather, transportation difficulties or other unavoidable/unforeseen circumstances.

I have read and fully understand all the information contained in the Hawthorn Counseling Group document, *Agreement to Engage A Divorce Coach/Child Specialist*, and agree to its terms.

PARTY:

(Print Name)

(Signature)

(Date)