

NOTICE OF CLIENT RIGHTS

As a client of Reed Letsinger, LMFT #MFC48777, you have the following rights:

- To receive adequate care and treatment services without regard to your race, sex, ethnicity, religion, disability, or sexual orientation or preference
- To be provided with all necessary information including your rights and all rules governing conduct in the program in order to give informed consent to receive treatment
- To confidentiality of all communications and records about your treatment except those provided for by law and those for which you have signed and dated a release of information form. You have a right to be informed of the exceptions provided for by law
- To access information in your records or a summary of your records
- To be treated with respect, concern and dignity as a valued individual
- To be in a safe, healthful and comfortable atmosphere that supports your treatment
- To be actively involved in the course of treatment and in the development of your treatment plan
- Should you become dissatisfied with the treatment at any time, to express your grievances by phone or in writing to:

The California Board of Behavioral Sciences
Phone: (916) 574-7830
Address: 1625 N Market Blvd., Suite S-200, Sacramento, CA 95834

I have read and I understand these rights.

Signature: _____

Date: _____

Signature: _____

Date: _____

Signature: _____

Date: _____