Music Therapy Client Information

Client First and Last Name: _____   Age: _____

Parent/Guardian Names (*If Applicable*): _____   Gender: M / F

Date of Birth: _____/_____/_____

Address: _____   City: _____   State: _____   Zip: _____

Home Phone: _____   Cell Phone: _____

Email: _____   Preferred Method of Contact: _____

Diagnosis (*if known*) and/or Presenting Problem(*s*): _____

_____

_____

Emergency Contact: _____   Phone: _____

Relationship to Client: _____

How did you hear about us?: _____

What do you hope to gain through therapy?: _____

_____

_____

_____

_____

Other Conditions (*Seizures/Allergies, etc*.): _____

_____

Clients with a history of seizures or epilepsy are required to have a caregiver present.

Caregiver (*If Applicable*): _____

Preferred Sessions Times, Days of Week, Frequency: _____

_____

Music Therapy Sessions

Client First and Last Name: _____   Age: _____

RECOMMENDED DURATION FOR CLIENT

Number of Sessions: _____   Length of Session: _____

30 minutes - $60 X _____ (sessions) = _____ (total) +

45 minutes - $90 X _____ (sessions) = _____ (total) +

60 minutes - $120 X _____ (sessions) = _____ (total) +

Processing fee - $120 = _____   =   _____ (total)

PAYMENT/POLICIES

There is a minimum registration of 5 sessions to begin Music Therapy. There is a $120 Processing fee per family. The Processing fee is for an entire year. Payment for Music Therapy must be paid prior to the first session and is non-refundable. Fees are assessed for all credit card transactions.

We will offer a 'make-up' for any session missed by your Music Therapist or for any session canceled by the Music School (due to weather.) These make-up sessions will be scheduled with your Music Therapist.

In case of client illness or other absence, one make-up session per year is available if a caregiver/family member cancels the session in advance (as early as possible on the day of the session.) If a session is canceled with less than 3 hours' notice, this will be considered 'late contact' and a makeup session will not be offered. Please contact your Music Therapist (via text, phone, or email) and please also call the CSA office at 479-434-2020 regarding the cancellation as early as possible.