

Spiritual Direction Agreement
Informed Consent
Confidentiality

The information you share in spiritual direction sessions is confidential and will not be discussed or released to anyone, except in cases where there is sufficient cause to believe that you are suicidal, a life is in danger, or abuse is occurring. There are times at which I may offer a referral to a colleague who I have identified and know can provide some specific care and guidance in an area outside of my scope. I will only offer a referral to enhance your journey.

In my attempt to be the best spiritual director I can be for you, and to help you reach your goals, I may meet with other spiritual directors for supervision on our sessions together. I will not personally identify you, or any specific personal information discussed in our sessions.

I am required by law to report child abuse, elder abuse, and intentions to harm yourself or others.

If you have questions or reservations about this policy regarding confidentiality, then the policy should be discussed before you sign it. By signing below, you are accepting my confidentiality policy, its limits and exceptions.

Directee (print name) _____

Directee (signature) _____

Date _____

Guidelines for our Spiritual Direction Relationship

- Our relationship pertains to and concerns your spiritual life. It is not psychological counseling, pastoral counseling, psychotherapy, energy work, or medical practice of any kind.
- Fees are based on a sliding scale and are due in cash, check or credit card at the time of our session. For checks returned for insufficient funds, you will be responsible for the bank fee incurred, and thereafter our sessions will need to be on a cash or credit card basis only. The general fee is \$60/hour.
- Each session will be 60 minutes in length, beginning at a mutually agreed upon time.
- I appreciate a 24 hour notice if you must cancel our time together, and I will do the same.

I understand the above, and agree to these guidelines.

Directee (print name) _____

Directee (signature) _____

Date _____