

Adeena Pelberg
Holistic Educational Solutions
Educational, Neurodevelopmental, and Neuro-Rehabilitative Services
410-493-6219
Optimizing Function and Performance in Life

Client Consents (please initial next to each bullet)

- ❖ Please arrive 5 minutes early for your Intake to ensure we have the full hour needed. If I don't have the full hour you will be required to make a separate appointment to finish the Intake, pro-rated at the clinical session rate.
- ❖ Please allow 24-hour notice for cancellation of any scheduled session. Less than 24 hours' notice (with the exception of sudden illness, emergency, or hazardous driving conditions) constitutes a last-minute cancellation and I will charge you for your session time.
- ❖ An adult, preferably a parent/guardian must be present for every session.
- ❖ It is your responsibility to take notes during consultations and sessions in language that is understandable to you.
- ❖ It is your responsibility to carry out the home program I design for you/your child according to my specifications as appropriate follow-through to in-office sessions.
- ❖ Every 6-8 weeks parents are required to meet with me for a separate consultation session to discuss and evaluate progress, and (re)set goals.
- ❖ I am happy to speak with you briefly (for less than 10 minutes) by phone in between sessions at no charge.
- ❖ Photographs or video footage of segments of clinical sessions documenting progress is available for a small fee.

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- ❖ I am available to communicate with other professionals or practitioners. My fee is based on my time, pro-rated at the consultation rate.

- ❖ Services rendered by Holistic Educational Solutions are not intended to diagnose neurological disorders, nor will a neurologist be reviewing these records.

Please provide email and cellular phone number for communicating via phone or text messaging for brief scheduling confirmation/changes or home program clarification.

Email: _____

Cell phone #: _____

If client is a minor, Parents'/Caregivers' names: _____

Signature: _____ Date: _____

How did you hear about me? _____
