



Kate Warwick-Smith, M.A.

MARRIAGE AND FAMILY THERAPIST

Private Practice in
Santa Rosa and Sonoma

Office Addresses:

862 3rd Street
Santa Rosa, CA 95404

18340 Sonoma Highway
Sonoma, CA 95476

tel (707) 527-9525

fax (707) 938-3515

mft@katews.com

<http://www.katews.com>

MFC #40025

Authorization for the Treatment of a Minor

I, _____, as parent or legal guardian of
_____ hereby authorize his/her psychotherapeutic evaluation and treatment. As parent or legal guardian, I have the right to request information concerning the above minor's evaluation and treatment. However, I understand that the therapist may limit the amount of information disclosed based on what she determines to be in the best interest of the minor client.

Signed _____

Print Name _____

Date _____

Signed _____

Print Name _____

Date _____

Witnessed by _____

Print Name _____

Date _____

PSYCHOTHERAPY

Adults

Couples

Children

Dream Groups