



PetraTherapy

KvK 66370469

AGB Practice code: 90095415 AGB Owner code: 90119932

phone: 048360473

email:petrathrapy@outlook.com

Registration Form

General Information:

Name: _____ Date of Birth: _____

Address: _____ Postcode: _____

Primary Contact phone number: _____

Name and Number and Relationship in case of emergency: _____

email: _____

Preferred form of contact: email _____ Phone _____ Whatsapp _____ Text message _____

GP Information (if applicable)

Name: _____

Address: _____

Phone: _____



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KvK 66370469

AGB Practice code: 90095415 AGB Owner code: 90119932

phone: 0648360473

email:petraththerapy@outlook.com

PetraTherapy Practice Information:

I trained in psychotherapy and counselling in the UK and am registered there with the UKCP. In the Netherlands I am registered with the VIT. I offer therapy that is in line with UK psychotherapy standards and the standards of the VIT. I am also registered with NIBIG.

Fees and Cancellation Policy

My registration with the VIT and the SCAG and the RBCZ means that some Dutch Insurance companies will reimburse some or all of the therapy, depending on your package. Integrative therapy falls under additional care packages. International insurance companies tend to reimburse for some or all of the therapy. I am happy to work with the process of reimbursement of fees with your (international) insurance company, but the payment of fees is your responsibility as a client.

My fees are 120 euros per 50min session. The initial consultation costs 80 euros.

Payment of fees will be either weekly after each session or monthly at the end of each month. This will be agreed together.

There is a cancellation policy of 24 hours. The full fee will be charged for missed or cancelled appointments outside of the 24 hours.

Confidentiality

Confidentiality is the cornerstone of this kind of work.

For this reason, video and voice recording of sessions or part of sessions is not permitted, except with written consent of each person participating in the session.

It is considered good practice for therapists to take part in supervision to ensure they provide the best care that they can. I take part in group and individual supervision and EMDR specific supervision where I

discuss aspects of my work. The identities of the people I work with remain anonymous and so you cannot be identified by the content of these conversations.

In the event that I become suddenly unable to continue the work, a trusted and specifically chosen psychotherapy colleague would contact you and be available to you to think about next steps. They would not have access to your file, only your contact details and only then when I am unable to continue the work.

Please check the website www.petratherapy.com for up to date information on privacy and data protection. If you would like a hard copy of this please let me know.

The work

Regarding the work itself, it is collaborative, relational and a process. Goals for therapy will be discussed verbally and reviewed verbally at least every 6 months. I can not guarantee outcomes but I am committed to being present attentive and mindful of you and your reasons for seeking therapy in every session.

Inherent in any therapy is that it will end. Ideally, if either of us feels it is time to bring our work together to an end, this would be discussed between us and a mutual decision be reached. This could take a number of sessions to be sure the decision is a good one and to tie up any loose ends as far as possible. In the event that this feels difficult or not needed/wanted I would like to ask for a commitment to at least one final session.

Complaints

Any complaint process, if we can not resolve it together, would be handled by either the UKCP or the VIT ([De VIT - VIT - Vereniging van Integraal Therapeuten](#)). Please check the website for a more detailed complaints procedure or request a hard copy.

By signing below you are stating that you have read and agree to the principles of the practice as outlined above.

Signature: _____ Date: _____