Inward Journey Counseling

REQUEST FOR SERVICES

l,		, am requesting services for my
M	leet and Greet	\$ 25.00 for 30 minutes
Ir	ntake/Initial Assessment	\$180.00 or \$170.00 for self-pay for up to 90 minutes
Ir	ndividual Therapy	\$160.00 or \$150.00 for self-pay for 60 minutes
F	amily Therapy	\$160.00 or \$150.00 for 60 minutes
C	Couple Therapy	\$160.00 for 60 minutes
0	In Location Workshops/Classes	\$200 /hour including travel time
Li	fe Coaching	\$175.00 for 60 minutes
0	Other Services:	\$ for minutes

AGREEMENT TO PAY FOR SERVICES

I agree to pay Inward Journey Counseling (Wisnu Meier) on day of my appointment unless other arrangement has been made and agreed upon. If my check bounces, I understand that I will be charged a \$25.00 fee in addition to the original fee of services. A bill will be mailed directly to me.

Client Signature	Date
Guardian/Guarantor	Date
	_ Date
Witness	_ Date

EMAIL COMPLETED FORM TO wisnumeier@inwardjourneycounseling.com