



The Baltimore Therapy Center, LLC
103 Old Court Rd., Suite A
Baltimore, MD 21208
443-598-BTC1 (2821)

CONSENT TO TREATMENT FOR TELEMENTAL HEALTH

I have read the Baltimore Therapy Center's Telemental Health Services Informed Consent document. I understand the terms and agree to them.

EMERGENCY CONTACT INFORMATION

I permit the Baltimore Therapy Center to call the following emergency contact in case immediate assistance is needed during a telemental health session.

Name: _____

Contact number: _____

Name of Client/Parent (print) _____

Signature _____ Date _____