



## Grow Yourself Great Counseling and Consulting, PLLC



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Charlotte, North Carolina 28269

Consumer's Name:	Date of Birth:	Record #:
Legal Guardian:	Insurance:	Policy #:

### COURT APPEARANCES, SUBPOENAS AND EXPERT WITNESS TESTIMONY

-Preparation: **\$100.00 per hour**; billed in 15-minute increments

-Travel: **\$500/day flat rate** for out-of-town travel not including lodging expenses

-Time in court: **\$200.00/hour**

-Supervised Therapeutic Visitation: **\$200.00/hour** (includes court summary)

I have read the above, understand and agree with the provisions and associated fees of this policy.

\_\_\_\_\_  
Client Name (Print)

\_\_\_\_\_  
Client Name (Signature)

\_\_\_\_\_  
Date

***If the consumer has a legal guardian:***

\_\_\_\_\_  
Parent/Legal Guardian (Print)

\_\_\_\_\_  
Parent/Legal Guardian (Signature)

\_\_\_\_\_  
Date