



216 North Michigan Ave, League City, Texas 77573  
Phone: 281-332-5100 Fax: 281-332-5155  
[www.Psychology-Resources.com](http://www.Psychology-Resources.com)

## Consent Form

Your signature below indicates that you have read the Psychologist-Patient Services Agreement and agree to its terms, and also serves as an acknowledgement that you have read the HIPPA notice form described in the agreement.

---

Patient's Printed Name

---

Patient's Signature/Date

---

Parent's Signature/Date, if patient is under 18 years old