

Palm Harbor Family Counseling Center
Diane Miller Mandell MSSA, LISW, LCSW
350 Alternate 19 N, Suite C, Palm Harbor, 34683

Email: famcounse@aol.com Phone: (727) 254-9183 www.phcounseling.com

HIPAA NOTICE OF PRIVACY PRACTICES

I, _____, acknowledge that I have been given a copy of the HIPAA Notice of Privacy Practices. I also acknowledge that I understand the information contained in the notice and agree to the terms and conditions contained within, for services provided by _____ at the Palm Harbor Family Counseling Center.

Client Signature

Date

Client Signature

Date

Parent/Guardian (If client is a minor)

Date

Staff

Date