



OPAL Institute
Oregon Passionate Aging and Living
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Consent to Services

I have received and read, or had read to me, the **Introduction to Psychological Services** document and have received the **Notice of Privacy Practices**. I have had an opportunity to ask questions about the information provided. I understand my rights to privacy and the outlined exceptions, as well as the risks and benefits associated with assessment, consultation, or treatment. I understand that after our work together begins, I have the right to withdraw my consent to services at any time, for any reason.

The chart will be formally closed if someone hasn't made/kept an appointment 45-60 days from the last date of service, unless otherwise arranged by OPAL Institute staff.

Client Signature

Date

Provider

Date