

## "Gaining Skills for Life!"

## Informed Consent Form/Indemnity 2023 (Parent/Guardian - please print)

1(Parent/Guardian - piease print)	
of (Child's name) hereby, authorize and give m	ny permission and
consent to 7 Senses Therapy, LLC and/or 7 Senses Kids to perform evaluations, therapeutic	c treatments, and/or
area specific classes/tutoring as prescribed by a physician and/or recommended by a 7 Sen	• •
Occupational Therapist or Speech Therapist or by myself for the above named child. I ack	nowledge and
understand that there may be some inherent risk involved in the use of therapy equipment	and/or therapeutic
services. I agree to assume such risk and indemnify and hold 7 Senses Therapy, LLC and/or	•
and all employees harmless from any and all losses and claims for any injuries or other damo	
my child, and/or our belonging. I hereby indemnify and save harmless 7 Senses Therapy, LL	
and any and all employees harmless from and against any and all claims, loses, damage and in	•
including without limitation, reasonable attorneys' fees and court costs, arising out of or in	•
occurrence in the therapy studio or any occurence in any other area of the Shopping Center	
limitation the sidewalks, parking lot and driveways adjacent to and serving 7 Senses Therap	•
Kids (ii) any occurrence offsite located away from the therapy studio. The client will protect	
Indemnified Parties harmless and will pay on demand all costs, expenses and attorney fees	
Indemnified Parties in connection with such litigation, dispute, arbitration, negotiation or pr	•
chosen by the Indemnified Parties. This indemnity shall survive the expiration or earlier te	rmination of services.
I understand that I will be informed of the recommended services of the above named chil	d. I understand that I
may discontinue services at any time. I acknowledge and agree that a parent or legal guard	ian must be present or
on the premises during each session, unless I have signed the drop off release form.	
7 Senses Therapy, LLC, also reserves the right to discontinue services for any and all reaso	ons including but not
limited to: excess cancellations, failure to pay for services, missed sessions or no shows.	
I have carefully read and reviewed this Informed Consent Form and have had my questions	answered by the 7
Senses Therapy, LLC Occupational Therapist if necessary.	•
Current 2023 Studio Services and Prices (prices are subject to change)	
1. Initial Evaluation Standardized (\$299.00), report, POC, goals, and scores provide	ed.
2. Skills treatment sessions (\$69.99 (30 min), \$82.99 (45min), \$90.99 (60min))	
3. Quick questionnaire assessment: development, sensory and behavior: \$55.99	
4. Classes: fine motor, handwriting, Kindergarten Readiness: \$65.99/45 min	
5. Tutoring: \$59.99/45 min (in studio)	
6. Consultation: \$24.00 per 15 min	
7. Teletherapy: 62.99/30 min, 72.99/45 min, 82.99/60 min	
X	
Signature of Parent/ Legal Guardian Date	