

Walk In Clinic – Parent/Caregiver Questions

Anything you write here or say to your Maltby Centre counsellor is confidential unless you disclose a threat to yourself or someone else, in which case your counsellor will explain to you our responsibility to keep you and others safe.

Parent/Caregiver Name:	
1. Who is participating in the session today? (i.e., Mom, Dad, child, sibling, grandparent, etc)	
2. What concerns have brought you here today?	
3. What would be most helpful to talk about in this meeting today?	
4. For us to be most helpful is there anything you feel is important for us to know about your culture, ethnicity, religion, language, sexual orientation, gender identity/expression, mental or physical health, or other?	
I agree to this walk-in counselling session. <input type="checkbox"/>Yes <input type="checkbox"/>No I have been given a copy of the Maltby Centre Client Services Booklet and understand the risks and benefits of counselling. <input type="checkbox"/>Yes <input type="checkbox"/>No	
_____	_____
Signature	Date