

**SUE DANIEL, PHD, LMFT, NASP, LCADC**

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**BILL OF RIGHTS**

To Our Clients,

As recipients of services from **SUE DANIEL, PHD,** you are entitled to the following rights:

- To receive services without regard to your race, religion, sex, age, marital status, national origin, veterans status, disability, or sexual orientation.
- To be treated with respect, consideration, and dignity.
- Request and receive information about the therapist's professional capabilities, including licensure, education, training, experience, professional association membership, and limitations.
- Have written information about fees, methods of payment, and insurance reimbursement.
- Know the limits of confidentiality and the circumstances in which a therapist is legally required to disclose information to others.
- Ask questions about your therapy or assessment.
- Refuse to answer any question or disclose any information you choose not to reveal.
- Receive referral names, addresses and telephone numbers in the event that your therapy needs to be transferred to another clinician.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date