



*Sky Snogren*  
MA, LPC

## Professional Disclosure Statement

**Methods of therapy:** My approach to therapy is a client-centered one built on a creative process with the client according to their needs. I have additional training in Hakomi, Gestalt, EMDR, Brainspotting, Somatic Archaeology™, Mindfulness, and Radiant Heart Healing. I utilize body awareness techniques to facilitate personal growth and work with family of origin issues as a developmental model of self. With the client's consent to work somatically, I use touch as part of the therapeutic process. I specialize in trauma as well as personal and spiritual growth employing body-centered and mindfulness-based psychotherapy.

**Formal training:** I hold a master's degree in counseling psychology from Naropa University, Boulder, CO (2001).

**As a licensee** of the Oregon Board of Licensed Professional Counselors and Therapists, I abide by its code of ethics. To maintain my license, I am required to participate in continuing education, taking classes relevant to my profession.

**Fees:** My fee is \$210 per 55-minute session.

**Cancellation Policy:** *For private insurance or cash pay clients*, I require 24-hour notice if you cannot make it to a session, save for emergency-type situations. If I do not receive 24-hour notice, you will be billed \$100 to be paid at the time of or before our next meeting or via a pre-arranged payment agreement. *For Medicaid/OHP/Open Card clients*, I require 24-hour notice if you cannot make it to a session. If I do not receive 24-hour notice after 3 NO SHOWS or last-minute cancellations, I will have to close you as a client. This is a policy suggested by Medicaid that I have avoided using but now need to implement. *My time is valuable, as is yours. I usually have a waiting list and could get someone else in your time slots with the proper 24-hour notice.*

### As a client of an Oregon licensee, you have the following rights:

- to expect that a licensee has met the qualifications of training and experience required by state law;
- to examine public records maintained by the Board and to have the Board confirm credentials of a licensee;
- to obtain a copy of the Code of Ethics (Oregon Administrative Rules 833-100);
- to report complaints to the Board;
- to be informed of the cost of professional services before receiving the services;
- to be assured of privacy and confidentiality while receiving services as defined by rule or law, with the following exceptions:
  - 1) reporting suspected child abuse;
  - 2) reporting imminent danger to you or others;
  - 3) reporting information required in court proceedings or by your insurance company or other relevant agencies;
  - 4) providing information concerning licensee case consultation or supervision; and
  - 5) defending claims brought by you against me;
- to be free from discrimination because of age, color, culture, disability, ethnicity, national origin, gender, race, religion, sexual orientation, marital status, or socioeconomic status.

You may contact the Board of Licensed Professional Counselors and Therapists at:

3218 Pringle Rd SE, #250, Salem, OR 97302-6312 | 503.378.5499 | [lpct.board@state.or.us](mailto:lpct.board@state.or.us) | [oregon.gov/OBLPCT](http://oregon.gov/OBLPCT)

**I have read the preceding information and understand my rights as a client.**

\_\_\_\_\_  
Client's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Therapist's Signature

\_\_\_\_\_  
Date