

## ANGER MANAGEMENT REGISTRATION FORM AND INFORMED CONSENT

**Group Leader:** Julia Messer, Ph.D., Licensed Psychologist  
Certified Anger Management Specialist

**Location:** Office Suites, 201 Shannon Oaks Circle, Suite 200  
Cary, NC 27511

**Times/Dates:** Adult Group 10:00 – 11:15, Saturdays  
Teen Group 11:30 – 12:45, Saturdays  
Open Enrollment

To register, please complete this form and bring it to your initial consultation / assessment, which will need to be completed prior to starting the group. To schedule this 30 minute interview, contact Julia Messer, Ph.D. at 919-428-2766.

**Description:** This weekly, ten-session group is a psycho-educational presentation of eight core anger management skills, designed to help you manage anger and improve relationships with others. Each session is 75 minutes. Upon completion of ten sessions, group members will receive a letter verifying completion of the program. It is not intended as therapy or treatment, or as a replacement for therapy or treatment; however, it can be a supplement to current individual or couples counseling.

This group is not appropriate for individuals or couples who have encountered partner abuse in their current relationship within the past year. We are happy to provide referrals for domestic abuse programs.

**Fee:** The group fee is \$50 per group (10 total for completion of program), \$20 for Anger Management workbook, and \$80 for the initial consultation / assessment. Payment can be made in two payments of \$300, or in one payment of \$575 (\$25 discount for payment in full).

**Confidentiality:** Participating in a group such as Anger Management is a private and personal experience for each participant. As such, members are expected to respect the confidentiality of all participants and their remarks and actions, and keep all such information private and confidential. In addition, the materials provided in class by Century Anger Management are protected by copyright, and cannot be reproduced, copied, stored electronically or otherwise duplicated or distributed without the express written permission of Century Anger Management.

**Exceptions to Confidentiality:** In general, the law protects the privacy of communications between a psychologist and client. In most situations, we can only release information about your involvement in Anger Management group with your written permission, but there are some exceptions.

1. If the client presents an imminent danger to his/her health or safety
2. If there is cause to suspect that a child under 18 is abused or neglected, or if there is reasonable cause to believe that a disabled adult is in need of protective services
3. If there is cause to believe that a client presents a clear, imminent danger to the health and safety of another
4. If you are involved in a court proceeding and a request is made for information concerning psychological services, such information is protected by psychologist / client privilege law. We cannot provide information without your written consent or a court order.
5. If a client files a complaint or lawsuit against us, we may disclose relevant information regarding that client to defend our practice.
6. If a client has been mandated or asked to attend Anger Management by a third party (Human Resources department, court order, attorney), a brief written report summarizing general progress and attendance may be provided to this third party.

**Informed Consent:** As a participant, I acknowledge that my experience in Anger Management, in whole or in part, may engender new perceptions and a range of emotions that at times may include uncomfortable emotions. I understand that the exercises are designed to expand perceptions in behalf of an enhanced capacity for empathy and mutual understanding. I voluntarily choose to participate in this program, and I agree to hold Julia Messer, Ph.D., Orenstein Solutions, P.A., and Century Anger Management harmless against any claims related to my experience in the Anger Management program. I clearly understand that it is always my choice as to whether to participate in the exercises offered.

**Group Rules:** We encourage and appreciate participation, feedback, and comments about group content and method of instruction; however, there are some rules to help groups stay focused, run more smoothly, and maximize each member's experience.

1. Please be respectful of others in the group and the group leader.
2. Please be on time and keep current with your fees.
3. Participation is not allowed for members under the influence of alcohol or drugs.
4. Please keep group information confidential.

**Please complete the following:**

**Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Daytime Phone** \_\_\_\_\_ **Evening Phone** \_\_\_\_\_

**Email Address** \_\_\_\_\_

What is the best way to contact you? \_\_\_\_\_

**Informed Consent (Agreement):** I declare that I have read and understand all of the information on this information form: that all of my responses are accurate and true to the best of my knowledge; and that I have read and understand the Informed Consent and Confidentiality Agreement and agree to abide by the terms of both.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature