

**Margaret Lang-Garnhart, LCSW
Evergreen Counseling Center, PLLC
210 Wirt Street SW, Suite 301
Leesburg, VA 20175
703-727-5209
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Welcome to Evergreen Counseling Center, PLLC. Below is some information that might answer some of your questions as you inquire about working together with me.

Credentials, Education and Experience: I am a clinical social worker, licensed by the state board of Virginia. I completed my undergraduate work at Fordham University (1990) and my graduate work at Hunter College School of Social Work (1994) in New York City. While my experience has been diverse, much of my work has focused around families, beginning in school and counseling settings Brooklyn, New York. In 1998, I moved to Virginia where I worked as a counselor for Catholic Charities and then as a facilitator and director of the Nurturing Program, a program designed to promote positive behaviors and strong attachments in families. Since 2008, I have been in private practice, providing individual, group and family counseling to adults, children, adolescents, parents and couples. In addition to my social work practice, I enjoy running, hiking, the beach, music and my family.

Office Organization, Telephones and Emergency Coverage: To communicate about appointments, leave a message or speak with me between sessions, please feel free to send me an e-mail at sunsong2mp@gmail.com or leave a message for me at: 571-252-3328 and I will reply on the next business day. Generally, I am in the office Tuesdays through Thursdays and check messages and return calls on those days. In case of emergency, please call 911.

Appointments will be held at:
210 Wirt Street SW, Suite 301
Leesburg, VA 20175

Fees: For individual and family counseling services, the fee for a 50 minute session is \$125.00. The fee for assessment sessions is \$150.00. For a list of fees for group services, please inquire. I accept cash and check payment and payment is due at the time of service. As I do not accept payment through insurance, fees are the responsibility of the client at the time services are provided. A receipt will be provided at the time of payment.

Scheduling and Cancellations: I request 24 hours notice of any cancellation. If you need to cancel and if I am able to fill your session time with another appointment, there will be no missed appointment fee. Otherwise, a missed appointment fee of \$50.00 may be applied. Your appointment times may be given to another client if you fail to come to an appointment.

Voluntary Participation: Participation in counseling services at Evergreen Counseling Center, PLLC, is optional. I understand that I can discontinue therapy at any time. I agree inform Margie Lang-Garnhart, LCSW, of my decision should I choose to discontinue sessions. I can return to therapy at a later date as long as appointment times are available and that the offered therapy is clinically appropriate to the needs expressed.

Risks/Rewards: While counseling can be very helpful, it entails questions/conversations about current symptoms and concerns as well as personal and family history. At times, this process may elicit some anxiety or emotional discomfort. I ask that clients continue to communicate with me about comfort level and needs throughout the process.

Authorization: Having read, understood and agreed to the above, I authorize Margie Lang-Garnhart to provide counseling and/or assessment to _____.

Date: _____ Signatures: _____