Wilderness Therapy Consent for Services And Waiver of Liability

Wilderness Therapy Description

Wilderness therapy is an experiential form of therapeutic work that draws on the resources and wisdom of the natural world. Nature can support your healing journey by helping you connect with a sense of place and belonging, in addition to challenging your usual ways of being in the world. While some wilderness therapy takes place in remote settings, you could also participate in urban environments or indoor settings. Some of the activities and environments you might participate in include the following:

- Walking on public sidewalks, bike paths, and the land to either side
- Exploring public parks and open space
- Interacting with the natural world (earth, water, plants, animals, minerals, etc)
- Gardening and horticulture activities
- Equine activities
- Indoor rock climbing in a controlled environment

Wilderness Psychotherapy Consent For Services

In order to participate in Wilderness Psychotherapy activities, which are frequently based in public and/or outdoor locations, it is important for you to read, understand, and agree to the following:

- I understand that wilderness therapy activities may take place at facilities or on premises not affiliated with Lion's Breath Counseling. I further understand that Lion's Breath Counseling does not take responsibility for any aspect or condition of these independent facilities or premises.
- I understand that there are potential physical dangers inherent in some of the activities associated with wilderness therapy, many of which are those associated with any type of physical exertion. I affirm that I am in proper physical condition to participate in wilderness therapy activities and further acknowledge that my therapist is not able to provide any type of medical clearance or advice for me with regard to my readiness to engage in these activities. I understand that if I have questions or concerns about my capacity or readiness to engage in any of these activities I will consult first with my physician or other appropriate health care provider.
- I understand that there are potential risks inherent in wilderness therapy. I agree to indemnify and hold harmless Lion's Breath Counseling for any harm that may befall me related to uncontrollable external factors. These include but are not limited to physical and/or psychological injury or illness related to uneven ground, inclement weather, insect stings, animal bites, falling branches or rocks, sunburn, exposure to cold/heat, equipment failure, acts of Nature, and more.
- I understand that privileged communication between me and my therapist cannot be guaranteed in settings outside the office as I may be seen or heard by others. I understand that my therapist will endeavor to support confidential communications and maintain professional boundaries to the



fullest extent possible when we are outside of the office. However, I agree to indemnify and hold harmless Lion's Breath Counseling for any harm that may befall me related to engaging in therapeutic activities in a public venue.

Based upon my representation that I am in proper physical health and condition to participate in wilderness therapy, I agree:

- 1. To take full responsibility for my physical safety and to not to engage in any activity in which I do not feel safe:
- 2. To let my therapist know if I have any questions or issues that arise after agreeing to any of these activities and to recognize that simple consent for these services does not require me to participate in them and that I can rescind this consent at any time;
- 3. To fully disclose any mental, physical, or emotional condition/s or limitation/s which might affect my ability to participate in the activities of wilderness therapy;
- 4. To assume all risk of injury to myself and all risk of damage to and loss of my property arising out of my participation in wilderness therapy;
- 5. For myself, my heirs, executors, administrators, personal representatives and assigns, to release and forever discharge Lion's Breath Counseling from any and all liability for any injury, including death, and for any and all liability, claims, demands, actions, loss and damage arising out of or in any way connected with my participation in wilderness therapy.

By signing below, I agree to these conditions and voluntarily consent to receiving wilderness therapy services:

Client's name:	Date:
Client's signature:	
Theranist's signature	Date: