

# Adult RO-DBT Group Agreement

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*\* indicates a required field*

I will attend all scheduled groups for 30 weeks

I agree to actively participate in each group session and resist any behaviors that will interfere with my therapy.

Attending group under the influence of drugs and/or alcohol or after restricting or purging is prohibited.

**\* I agree to attend weekly individual therapy while in group and agree to communicate any self-harm urges or thoughts to my individual therapist. I understand that there can be ongoing communication about my group participation and progress with my individual therapist. My individual therapist's name is:**

I agree to complete weekly homework and bring it to group ready to discuss.

I agree to practice the self-care and coping skills outside of group weekly.

I understand that group is not crisis management, and I commit to discuss any risk behaviors immediately with my individual therapist

I understand that I am responsible to pay the \$67 group fee for each group REGARDLESS OF ATTENDANCE (including scheduled vacations, etc). Any absence must be discussed with the group leader ahead of time and any four consecutive group absences will result in dismissal from the group.

If I do not feel the group is working for me and would like to leave, I will give 2 weeks notice.

I must have a credit card on file to use for charges not paid at the time of service. This credit card will be used to pay for missed sessions on the date of missed group sessions (individual or family).

No subgrouping. Please do not spend time with group members outside of group on a personal basis. Please do not exchange emails or phone numbers with other group members as this could make others feel left out.

All groups are confidential, and all group members are asked to agree to uphold confidentiality.

\* **I consent to all of the above requirements for group attendance.** \_\_\_\_\_  
I consent to sharing information provided here.

\* **Date Signed**