



# Lightoflights

Therapy & Counseling

---

## Dear Client,

Thank you for choosing **LIGHTOFLIGHTS** as your trusted partner for effective counselling and therapy. We salute you for taking this positive step towards your mental and emotional well-being.

We are happy to be part of your story!

We started this journey in 2015 as a budding Instagram community where we bravely shared our mental health stories and challenges with pain, heartbreak, loss, anxiety, and the weight of depression. Over the years, we've grown into a trusted space for healing and inner peace. We provide psychotherapy and counselling for relationships, marriage, anxiety, depression recovery, and other mental health concerns in the country.

With Lightoflights, you are never alone. Our virtual sessions ensure you get reliable support from the comfort of your home, for your unique needs. Our fees are affordable and even more budget-friendly when you choose longer therapy sessions.

We serve over 13 clients weekly, addressing individual, couple, family, and group psychotherapy needs, including support for divorcees and those dealing with abuse, grief, anxiety, depression, and more.

At Lightoflights, your mental health matters, and we are committed to ensuring strict confidentiality as we support you through this period.

## With Love and Appreciation,

**Imoleayo O.E. LCMHC, MedCoE.**  
FOUNDER & CEO



# Client Agreement

## Please read carefully

At Lightflights, we believe in a collaborative and compassionate therapeutic relationship between you and your counselor. Here's what you need to know:

### I. Commitment to Your Healing Journey

1. Our therapy sessions are typically 80 minutes long, and they occur weekly. Your counselor reserves your designated time each week. If you need to cancel an appointment, please do so at least 24 hours in advance. We understand that life can be unpredictable, so we allow three cancellations within two months at no charge. On the fourth canceled appointment, a fee will apply to compensate for your counselor's time.
2. We kindly request that payment be made before each session. We reserve the right to suspend therapy if payments are not received promptly. For clients residing outside our therapist's primary location, payment must be made at least 36 hours before the session.
3. If you have financial concerns, please discuss them with our booking agent before your session, as our therapists aim to deliver the best therapeutic care during sessions.
4. For clients choosing to pay by check, there will be an N10,000 service fee for any returned checks. If therapy continues, payments must be made before the next session.
5. Please ensure that all participating parties are ready for your sessions before making payments. We do not offer refunds but allow sessions to be transferred to another person or held for up to two months for the paying client to use. Sessions unused within this period will be forfeited.

### II. Your Privacy and Confidentiality

1. Your communications with your therapist are strictly confidential. This means that your therapist will not share information about your case without your explicit written consent.
2. Your therapist may break confidentiality under specific circumstances, including:
  - a. Reason to believe that there is child, elder, or dependent adult abuse or neglect.
  - b. Reason to believe that you pose a credible threat to harm yourself, someone else, or property.
  - c. Disclosure of the creation, duplication, or distribution of explicit media involving minors or elders.
  - d. Introduction of your emotional condition in a legal proceeding.
  - e. Court-ordered release of your records.



**Client Agreement - Page 2 of 2.**

**III. Therapist Availability and Emergency Care**

Therapists check WhatsApp and phone messages during regular business hours. Messages received outside these hours will be addressed on the next business day (9 a.m. to 5 p.m.).

In case of an emergency requiring immediate attention, please seek assistance at the nearest emergency services department or call your National Emergency Hotline.

**IV. Additional Rights and Responsibilities**

You can end your counseling at any time for any reason without any further obligation except for payment for services already received. You can also question any aspect of your treatment with your therapist.

We promise to maintain professional and ethical boundaries throughout our therapeutic relationship with you.

Lightoflights reserves the right to discontinue counseling at any time, especially in the event of a violation of this agreement or if our therapists determine that another facility may better serve your needs. In such cases, we will recommend an appropriate therapist or establishment.

Your signature below indicates that you have read, understood, and received a copy of this agreement. By signing, you provide permission to Lightoflights to provide counseling services, and this contract applies to all future sessions you undertake with us.

Client #1 Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Client #1: \_\_\_\_\_

Client #2 Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Client #2: \_\_\_\_\_

For individuals, Couples, and Groups