

Schedule of Fees Per One-Hour Session for Clinical Services					
General Public Pricing					
Gross Household Income Before Taxes	Family Size				
	1-2	3-4	5-6	7-8	> 8
\$0-\$10,000	\$10	\$10	\$10	\$10	\$10
\$10,001-\$20,000	\$10	\$10	\$10	\$10	\$10
\$20,001-\$30,000	\$20	\$15	\$15	\$10	\$10
\$30,001-\$40,000	\$30	\$25	\$20	\$10	\$10
\$40,001-\$50,000	\$40	\$35	\$25	\$15	\$15
\$50,001-\$60,000	\$50	\$40	\$30	\$20	\$20
\$60,001-\$70,000	\$60	\$50	\$35	\$25	\$20
\$70,001-\$80,000	\$70	\$60	\$40	\$30	\$30
\$80,001-\$90,000	\$80	\$65	\$45	\$35	\$30
\$90,001-\$99,999	\$90	\$70	\$55	\$40	\$30
Lipscomb Affiliate and Partner Pricing					
Gross Household Income Before Taxes	Family Size				
	1-2	3-4	5-6	7-8	> 8
LU Undergraduates	\$0	\$0	\$0	\$0	\$0
\$0-\$10,000	\$10	\$10	\$10	\$10	\$10
\$10,001-\$20,000	\$10	\$10	\$10	\$10	\$10
\$20,001-\$30,000	\$20	\$15	\$15	\$10	\$10
\$30,001-\$40,000	\$30	\$25	\$20	\$10	\$10
\$40,001-\$50,000	\$40	\$35	\$25	\$15	\$15
\$50,001-\$60,000	\$50	\$40	\$30	\$20	\$20
\$60,001-\$70,000	\$50	\$50	\$35	\$25	\$20
\$70,001-\$80,000	\$50	\$50	\$40	\$30	\$30
\$80,001-\$90,000	\$50	\$50	\$45	\$35	\$30
\$90,001-\$99,999	\$50	\$50	\$45	\$40	\$30
Standard Clinical Hour Rate: \$90.00.					
Other Charges Payable in Advance: (1) Report Writing Fee \$25.00/Hour (2) Court Fee \$50.00/Hour (3 hour minimum)					
Affiliates include: Lipscomb University and Academy students, faculty, staff, graduate students, and alumni					
Partners: When a client is referred to LFTC by a non-profit, place of worship, or business with whom LFTC has established a formal partnership, that client is eligible to use the Lipscomb Affiliate and Partner Pricing scale.					

Our fee scale is based on the total amount of money your family makes in one year (before taxes as verified by a copy of tax form 1040 or check stub). If you are single, this amount is equal to your yearly income. Each session will last approximately 50 minutes. If you have scheduled a double session (i.e., 2 hours), you will be charged for two sessions. Most testing fees are included in the session fee. Any testing not included will be discussed with you in advance before you take the test. You are expected to pay for each visit at the time the service is rendered. Payment may be by check or cash. Make checks payable to Lipscomb Family Therapy Center and put therapy on the memo line. All payments will be given a receipt. We do not accept insurance assignments; most insurance companies will not pay for services provided by therapist interns. We appreciate the opportunity to serve you. If you have any questions, concerns, or suggestions regarding any aspect of LFTC services, please discuss this with front desk staff, your therapist intern, or his/her supervisor.

By signing this document, I agree to the payment scale listed above. I understand that the Lipscomb Family Therapy Center relies on client fees in order to offer affordable services to clients in need. Additionally, I understand that I may request an alternate payment schedule by submitting a Sliding Fee Scale Adjustment Affidavit to my therapist.

 Client Signature

 Date