



**Mesha L. Ellis, Ph.D.**

Licensed Clinical Psychologist

AASECT Certified Sex Therapist

California . Georgia . Nevada . Tennessee

CA: PSY20263

GA: PSY003274

NV: PY0990

TN: P0000002777

**STANDARD AGREEMENT FOR CO-PARENT THERAPY BY A MENTAL HEALTH PROFESSIONAL**

It is hereby agreed upon by and between:

\_\_\_\_\_ and \_\_\_\_\_  
(parent) (parent)

that Dr. Mesha Ellis will conduct their co-parent therapy.

Dr. Ellis is not a custody evaluator and will not be making any recommendations in regards to the time the child(ren) spend with each parent and/or each parent’s legal decision-making rights. Rather, if necessary and requested by both parents, she can assist in the implementation of the previously agreed to and/or court ordered parenting plan.

Dr. Ellis will first meet with each parent individually for one 60-120 minute session to gather information and to formulate treatment goals. She will then determine the format of subsequent sessions whether they be parallel or conjoint co-parent sessions or a combination of both.

Unless there is a specific written agreement or court order to the contrary, the parties acknowledge that information disclosed by either parent to Dr. Ellis in written form, electronically, by fax, by voice mail, during individual intake or parallel co-parent sessions will be shared with the other parent at Dr. Ellis’ discretion.

Dr. Ellis will not initiate or respond to communication by telephone. Instead, she will use electronic communication with co-parents. The co-parents acknowledge the possibility of misdirected electronic communication if it is used. The parents are expected to include, (“cc”), the other parent on any and all electronic communication sent to Dr. Ellis. If electronic communication is sent without including the other parent, Dr. Ellis will forward the communication immediately to the other parent.

Dr. Ellis shall only be permitted to communicate with collaterals regarding this case with both parents’ consent. Communication with the parents’ attorneys, with consent by both co-parents, will only take the form of a simultaneous conference call or joint meeting wherein both parents’ attorneys are present.

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Dr. Ellis' fee is \$250.00 per 50 minute session. There shall be an estimated fee deposit/retainer in this case of \$2,500.00 to be paid prior to the beginning of any therapy sessions. The cost of the therapy sessions shall be paid by cashier's check, credit card, or debit card as follows (check one):

Parties will split the cost of all sessions,

\_\_\_\_\_ % by Mother; \_\_\_\_\_ % by Father.

Each party will pay separately for sessions that each party attends individually and split the cost of conjoint co-parent sessions.

\_\_\_\_\_ % by Mother; \_\_\_\_\_ % by Father.

Other (define method)

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Professional fees will be charged for all direct sessions plus for any travel time, phone calls, writing or review of documents required in the course of the psychotherapy, including but not limited to memos made to the chart, communication with the parties, attorneys, evaluators, collaterals, or the court. If either co-parent requests that Dr. Ellis review specific materials (including but not limited to documents, video, audio, etc.) she will proceed only if both parents agree and acknowledge that they will be charged for her time (at \$250.00 per 50 minutes) to review said materials.

Any cancellation of sessions must be made at least 24 hours (1 business day) in advance. Sessions canceled less than 24 hours in advance will be charged at full fee to the party making the cancellation. Dr. Ellis will inform the co-parents when the retainer is low and requires replenishment. If there are outstanding fees owed to Dr. Ellis by either party 24 hours prior to a scheduled session, she may cancel the scheduled session and not reschedule the session until all outstanding fees are paid and the retainer has been fully replenished.

If Dr. Ellis is deposed or called to testify in court or to submit a progress report to the court on any issue regarding this co-parent therapy, she must receive payment seven (7) office days in advance to prepare the progress report or to schedule her testimony time (a minimum of a half-day with no on-call). She will be paid her customary hourly fee for preparation of the report or for the preparation, travel and testimony time. If one parent does not waive privilege and therefore does not give permission for Dr. Ellis to disclose information regarding the co-parent therapy, Dr. Ellis will appear as required by the subpoena and assert the privilege on said parent's behalf.

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