



**Dr. Sheri M. Siegel**  
Licensed Psychologist

## **Addendum to Consent Form:**

### **Interaction with the Legal System**

I, \_\_\_\_\_, agree that I will not involve or engage Dr. Sheri Siegel in any legal issues or litigation in which I am a party to at any time either during counseling or after counseling terminates. This would include any interaction with the Court system, attorneys, Guardian ad Litems, psychological evaluators, alcohol and drug evaluators and/or treatment programs, or any other contact with the legal system. If I believe it necessary to subpoena Dr. Sheri Siegel to testify at a deposition or a hearing, I would be responsible for her expert witness fees in the amount of \$1500 for one-half (1/2) day to be paid five (5) days in advance of any court appearance or deposition. Any additional time spent over one-half (1/2) day would be billed at the rate of \$375.00 per hour, including travel time. I understand that if I subpoena Dr. Sheri Siegel, she may elect to not speak with my attorney, and a subpoena or other court involvement may result in Dr. Sheri Siegel withdrawing as my psychologist due to the change in the therapeutic relationship.

---

Signature of Patient or Legal Guardian for Patient

---

Date