

# Sweeney Youth Homes

**P.O. Box 1353 Goleta, CA 93116-1353** (805) 964-1079 Fax: (805) 681-3442 E-mail: syhomes@impulse.net

## Family Therapy Contract

Family members agree to initiate all family therapy sessions through contracting either Sweeney Youth Homes' Clinical Director or the Family Therapist that is assigned to the family member residing at SWEENEY YOUTH HOMES. At that time, family therapy will be scheduled. Phone numbers may be obtained through the facility manager.

Family members agree to be on time for scheduled appointments. Scheduled family therapy sessions will be cancelled if family members are more than 15 minutes late.

It is understood that SWEENEY YOUTH HOMES requires a minimum of 5 individual family therapy sessions before they will consider a recommendation for reunification. Attendance at SWEENEY YOUTH HOMES ' multi-family therapy group may substitute for an individual family therapist session. In addition, family members and/or primary care-takers also agree to have regular visits and phone contact with the resident family member.

Family members agree to abstain from the use of alcohol or other drugs for 48 hours prior to attending family therapy sessions. It is understood that suspected alcohol or drug use will result in a cancelled family therapy session.

It is understood that two cancelled session either through failure to show up, alcohol or drug use, or through being more that 15 minutes late will result in a one-month suspension of family therapy sessions.

I/we have read and understand the above requirements for family therapy sessions and agree to abide by them.

\_\_\_\_\_  
Resident's Signature                      Date

\_\_\_\_\_  
Family Member Signature              Date

\_\_\_\_\_  
Sweeney Youth Home Representative    Date

\_\_\_\_\_  
Family Member Signature              Date