

# Paul J. Stevenson OAM      Access Psychology

C.S.W. B.A.(Mus) Dip.Psych. MOP. Fellow AAPi.

## Psychologist

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**Postal Address:** Level 18, 333 Anne Street, Brisbane 4000

**Offices:**

**Brisbane:** Level 18, 333 Anne Street, Brisbane CBD (between Creek and Wharf Streets)

**Gold Coast:** Level 9, Wyndham Corporate Centre, 1 Corporate Court, Bundall (off Slatyer Avenue)

**Melbourne:** Level 23, HWT Tower, 40 City Road, Southgate

**Sydney:** Level 32, 1 Market Street, Sydney CBD

Phone: 1800 805 860 or (07) 3232 1254

Mobile: 0412 000 080

Facsimile: (07) 3232 1200

E-mail: [access.psychology@gmail.com](mailto:access.psychology@gmail.com)

Web: [www.accesspsychology.com](http://www.accesspsychology.com)

## Contract

I/we \_\_\_\_\_ (authorised person/s) on behalf of \_\_\_\_\_ (company name if applicable), hereby request the services of Access Psychology (time: \_\_\_\_\_ date: \_\_\_\_\_).

I/we agree to pay all costs and to forward all payments in accordance with invoice due dates. Service rates are as follows (current January 2015).

- Counselling and Psychotherapy - \$250.00 per hour.
- Trauma debriefing and disaster management - \$250.00 per hour
- Psycho-legal reports - \$250.00 per hour.
- Court attendance - \$375.00 per hour.
- Supervision and mentoring - \$110.00 per hour.
- Education and seminar presentation – \$250 per hour.
- All travel for the above is at half rates.
- All out of pocket expenses.

I/we understand, that while this service may be underwritten by certain sponsors (eg. Insurance Companies, WorkCover, Medical Funds, etc.), the full payment for services is to be directed to Access Psychology in the first instance. I/we understand that it is my/our responsibility to arrange any remuneration from the sponsor.

Name/s: \_\_\_\_\_

Signature/s: \_\_\_\_\_

Date:      \_\_ / \_\_ / \_\_

Please fax this form immediately to (07) 3232 1200 to confirm your booking.