

**Point of Change Christian Counseling
An Affiliate of : Wood Christian Counseling
Jason Jenkins, MABC LPC
3800 Paluxy Dr. Ste. 240 Tyler, Texas 75703
Office: (903) 283.8729 * Fax: (888) 454.9083**

**Acknowledgement of Receipt of
Health Insurance Portability and Accountability Act (HIPAA)**

I acknowledge that I have received the HIPAA notice of the office of Point of Change Christian Counseling, An Affiliate of: Wood Christian Counseling and attest that Jason T. Jenkins MABC LPC and Jennifer Wood, LMFT, LPC-S outlining the legal duties and privacy practices of health information about myself. I understand that if this notice changes in anyway, Point of Change Christian Counseling, An Affiliate of: Wood Christian Counseling and attest that Jason T. Jenkins MABC LPC and Jennifer Wood, LMFT, LPC-S will make such changes available to me for viewing.

Client's Printed Name: _____

Client's Signature: _____

Guardian's Signature if minor: _____

Date: _____