



# THE LEAGUE

## *Youth Autism Services*

Date: \_\_\_\_\_

Participant's Name: \_\_\_\_\_:

Welcome to The League's Autism Services! The League agrees to provide Autism Services to the named participant above as outlined in their service plan and you agree to comply with all The League's Autism Services policy and procedures. You have agreed to our services with the terms and conditions below.

Any Autism Services provided to you by The League will be billed at the hourly rates listed below depending on the services rendered:

Intensive Individual Support Services:	\$30.00 per hour
In Home Respite Services:	\$25.00 per hour
Therapeutic Integration Services:	\$25.00 per hour
1:1 Therapeutic Integration Services:	\$30.00 per hour
Family Consultation:	\$100.00 per hour

If you choose to receive IISS, you may receive family consultation on a monthly basis, regardless of the number of IISS hours. At a minimum, family consultation will be required twice per year to develop and review the Individual Plan. You will receive monthly statements for the services rendered to your child as outlined above. Payment is always due upon receipt and if full payment is not received within 30 days of the invoice, services can be suspended and/or terminated. The above rates are subject to change and you will be give 30 days notice of any rate change.

If at any time you wish to terminate services with The League, you must provide 30 days written notice to the Director of Autism Services. Upon receipt of your final payment you will receive copies of all pertinent papers in your child's file.

We look forward to working with you. Please sign this letter of agreement and return it to the Director of Autism Services upon intake. If you have any questions, feel free to contact The League at 410.323.0500.

\_\_\_\_\_  
Willie Smith Jr., *Director*

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date