



EAP Counselling Services Registration Form

Name:

Business Name &
Address:

ABN:

Telephone:

Email:

Number of Employees:

Date to Commence
EAP:

Nominated EAP
Provider:

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| Contact Name – Louise Lugsdin M – 0408 370757 E – info@my-y.com.au |
| Business Name – MyY ABN – 2085 325 5233 |
| Business Location – Ocean Grove, Victoria. 3226 |

EAP Counselling Service Terms and Conditions:

- MyY is our nominated EAP Counselling Provider.
- We agree to support our employees by providing EAP Counselling Services which will be paid for by the business
- Each employee is entitled to an agreed number of counselling sessions per calendar year.
- We will provide MyY with a list of employees and ensure that this list remains up to date via a quarterly update.
- All employees can call MyY directly to make an appointment.
- All counselling sessions are confidential, and solution focused.
- The agreed fee for each Counselling Session is \$170 + GST
- Counselling Sessions are 1 hour in length.
- EAP Counselling Services will be invoiced weekly/fortnightly (see below for nomination) and payment via direct debit is appreciated.
- We understand that the names of employees who access EAP Counselling Sessions will remain confidential and will not appear on invoices.
- MyY will maintain a confidential spreadsheet listing employee names, number of sessions accessed and the date/s the service has been accessed.
- MyY will provide the Employer with data, including number of sessions accessed on a quarterly basis.
- At the time of signing this agreement, there is no sign-up fee.

I acknowledge and accept
the Terms and Conditions
noted above.

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Signature

Date



EAP Counselling Services Registration Form

Number of Counselling Sessions each employee can access through the EAP Counselling Program per year. Please tick your agreed number.

- 4 sessions
- 5 sessions
- 6 sessions
- 8 sessions
- 10 sessions
- Other – please nominate _____

I would like to be invoiced:

- Weekly
- Fortnightly

I would like to receive data regarding number of sessions used:

- Monthly
- Quarterly
- Annually

Contact Information

| | | | |
|-------|----------------------|----------|----------------------|
| Name | <input type="text"/> | Position | <input type="text"/> |
| Email | <input type="text"/> | Phone | <input type="text"/> |

5. Signature Date of Signature

Date Month Year



MyY in partnership with The Proven Group

