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**Time-Less Voices, LLC – Art Therapy Practitioner Support Closure Letter**

**Heading:** Art Therapy Closure Letter

**Company Name:** Time-Less Voices, LLC

@ [www.timelessvoicesusa.com](http://www.timelessvoicesusa.com)

**Client Information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Project: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**End Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Purpose:**

This document formally concludes the art therapy services provided to you by Time-Less Voices, LLC. It is intended to summarize your progress, provide recommendations for future activities or therapies, and outline the closure formalities.

**Client Summary:**

This section overviews your progress throughout the therapy sessions, highlighting key developments and milestones. It reflects on the therapeutic goals and how they have been addressed during our time together.

**Future Recommendations:**

Based on your progress and the insights gained during therapy, we recommend the following activities or continued therapies to support your journey:

* [List recommended activities or therapies tailored to the client's needs and progress.]

**Closure Formalities:**

Please review the following closure formalities and acknowledge by signing below:

1. **Client Acknowledgment:**
2. I, [Client Name], at this moment, acknowledge the formal conclusion of my art therapy sessions with Time-Less Voices, LLC. I have received a comprehensive summary of my therapy progress and understand the future recommendations provided.
3. Client Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. **Therapist Confirmation:**
6. I, [Therapist Name], affirm that I have provided an entire art therapy course to the client mentioned earlier, culminating in this closure letter as formal confirmation of the termination of services.
7. Therapist Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Disclaimer:**

This closure letter signifies the formal termination of art therapy services between the client and Time-Less Voices, LLC. It is not a certification of psychological health or a guarantee of therapy outcomes. Should you require further psychological support or wish to resume therapy later, please get in touch with Time-Less Voices, LLC or other qualified professionals.

Time-Less Voices, LLC – Discover More at [www.timelessvoicesusa.com](http://www.timelessvoicesusa.com)