

Session Date Verification

Date: [Current Date]

To: [Client's Name]

[Client's Address]

Dear [Client's Name],

This letter is to confirm your upcoming therapy session.

Session Date: [Session Date]

Time: [Session Time]

Location: [Therapist's Office or Virtual Platform]

If you have any questions or need to reschedule, please feel free to reach out.

Thank you,

[Therapist's Name]

[Therapist's Contact Information]