

(SAMPLE)

Fee, Cancellation and Insurance Policies

Fee Policy

Fees are payable at the time of service (unless prior arrangements have been made). Fees can be paid by check or cash.

A no-show appointment will be charged the full therapy fee. In circumstances of unusual financial hardship, I may be willing to negotiate a fee adjustment or payment installment plan. Return checks will result in a return check fee of \$50.00 in addition to any bank fees incurred.

Cancellation Policy

A specific time is reserved for you for each session. Should a cancellation be necessary for any reason, you are required to notify my office at least 24 hours prior to your appointment. Earlier notice will be appreciated.

Insurance Policy

In the event that your insurance company fails to pay for any reason, you are responsible to pay the balance. Please be advised that pre-certification is not always a guarantee of full payment.

Make Checks Payable to: _____

Signature: _____

Date: _____