



OFFICE POLICIES

IT IS OUR OFFICE POLICY TO CHARGE FOR COUNSULTATION/INTERVIEWS THAT ARE NOT CANCELLED WITHIN 24 HOURS OF YOUR SCHEDULED APPOINTMENT TIME OR FOR SESSIONS THAT YOU DO NOT SHOW FOR. YOU WILL BE RESPONSIBLE FOR \$125.00 FOR THE TIME HELD.

ALSO, YOU WILL BE RESPONSIBLE FOR ANY DEPOSITS AND(OR) FEES AT TIME OF SERVICE. IF PAYMENTS AND FEES ARE NOT PAID OR A PAYMENT PLAN IS NOT WORKED OUT IN A TIMELY MANNER YOUR ACCOUNT MAY BE TURNED OVER TO COLLECTIONS. PLEASE SIGN AND DATE BELOW INDICATING THAT YOU HAVE READ AND UNDERSTAND THIS POLICY.

SIGNATURE

DATE

(PARENT IF PATIENT IS A MINOR)

PRINT NAME

