

Late Cancellation/No show Policy

If you are unable to attend an appointment, I request that you provide at least 24 hours advanced notice to my office. Since I am unable to use this time for another client, please note that you will be billed a \$75.00 fee if your appointment is not cancelled within that 24 hour period, unless such cancellation is due to illness or an emergency. You will also be charge the \$75.00 fee if you miss your appointment without notification.

For cancellations made with less than 24 hours notice (unless due to illness or an emergency), or you miss your appointment without notification, your credit card on file will be charged a \$75.00 fee.

I appreciate your cooperation in this matter

Client Signature (Client's parent/guardian if under 18)

Date