



PHYSICAL HEALTH & HEALING CENTER

APPOINTMENT CANCELLATION POLICY

Physical Health and Healing Center want to thank you for choosing us as your health provider . We strive to render excellent care to you and your family . Your care and treatment is a priority to us. We also ask that you respect your therapist's time and expertise as well.

In an attempt to be consistent with this, we have an **Appointment Cancellation Policy** that allows us to schedule appointments for our patients, with respect for your time, the next patient's time, and the doctor's time.

OUR POLICY IS AS FOLLOWS:

We request that you give **6 hours notice** in the event that you cannot make it to your scheduled appointment. This will enable us to offer your cancelled time to other patients that desire to get their treatment completed. If a patient misses an appointment without contacting our office, it is considered a "missed" or "no show" appointment. The first missed appointment is forgiven, the second thereafter you will be charged a complete session.

Additionally, if you miss **more than 2 appointments**, Physical Health and Healing Center reserves the right to discharge you from the practice for failing to follow treatment recommendations.

If you have any questions regarding this policy, please let our staff know, and we will be happy to clarify the policy for you. We look forward to being a continued part of your wellness.

I have read and understood the Appointment Cancellation Policy of Physical Health and Healing Center, and I agree to be bound by its terms.

I, _____, have received a copy of Physical Health and Healing Center Appointment Cancellation Policy.

Date:

Signature of patient (or legal guardian)