**Practices and Policies**

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Contact Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Client Information**

Client Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Cancellation**

A 24-hour notice is required for cancellation of an appointment, or you will be charged in full for the appointment**.** Exceptions will be made in an emergency**.**

**Tardiness**

Appointment times are as scheduled. If you think there might be any delays in beginning our session on time, please let me know as soon as you can. If we do start late, please understand I might not be able to extend our time.

**Sickness**

Massage/bodywork is not appropriate care for infectious or contagious illness. Please cancel your appointment as soon as you are aware of an infectious or contagious condition. If it is within the 24-hour notice period, the cancellation fee will be waived.

**Payment**

Payment is due at the time of our scheduled appointment. I accept personal check or

cash. If you are scheduled to have weekly or more sessions on a regular basis, arrangements can be made for monthly billing. Invoices are sent out electronically on the first of each month and payment is due on the 15th.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_