

Financial Policy

Payment

- Payment for all services is due when rendered.

Cancellation Policy

- We would appreciate at least 24 hours notice if you are unable to keep your scheduled appointment. If we do not receive this notice then you may be responsible for the fee of the scheduled visit.

Non-Payment Procedures

- Should you have an appointment and leave the premises without making payment, we are entitled to charge the appointment fee to your credit card.

Credit Card Type _____

Credit Card Number _____

Name as it appears on Card _____

Expiry Date _____

I, _____, have read the above and understand that I am personally responsible for paying the fees for all services rendered. I authorize DrStephanie to charge any fees due as per the Financial Policy to the credit card information provided above.

Name _____

Signature _____

Date _____