

Hands of Gold
FINANCIAL POLICIES

PAYMENT FOR SERVICES: Our office requires payment in full for all visits and products at the time of service.

CLIENTS WITH INSURANCE: Clients must be responsible for collecting reimbursement from their own insurance company. We will be happy to give you a written receipt showing reimbursable codes, but we cannot accept responsibility for collecting your claim.

BROKEN APPOINTMENTS: We expect the consideration of a telephone call from you if you must break your pre-scheduled appointment time. We entrust you to record and remember the appointment time you've scheduled. A charge for the full value of the scheduled time will be assessed for broken appointments unless 24 hours notice is given.

Clients who habitually schedule then cancel (more than 3 incidences in one year) will be required to pay by credit card upon booking or will be restricted to calling for cancellation openings on the day service is desired.

OUT-OF-OFFICE SERVICES: If a client requires a visit at home or any other site outside of our office, an additional fee for travel time will be added to the bill.

RETURNED CHECKS: A \$15 service fee will be assessed for all returned checks. Checks not made good within 15 days of rejection by the client's bank will incur a late payment fee equal to 10%. An interest charge of 1.7% will be assessed per 30-day period for as long as the account remains unpaid.

I, _____ have reviewed the information provided above and agree to be responsible for all treatment rendered to me (or to my minor dependent child). I agree to pay Hands of Gold, for all products and services rendered as outlined above and I agree to abide by all policies of this office.

Signature _____ Date _____