

FINANCIAL POLICY

For your convenience, we will explain our office policies so that we can serve you more efficiently. Please read carefully.

1. Payment is due in full at the time services are rendered. \*\*
2. We will furnish you with the appropriate forms so that you can file with your insurance company for the services you receive.
3. Our office does not offer payment plans. We do accept Mastercard, Visa, and Discover.
4. You are expected to be on time for you appointments. If you are late for your appointment, the doctor will be unable to see you at that time. At least 24 hours notice of cancellation is required to avoid a missed appointment charge. The charge is \$47 for missed adjustments and \$100 for missed exams. This charge is not covered by insurance.
5. Returned checks are subject to a \$20 service charge.
6. It is important for our records that you advise us of any changes to your personal information.

\*\* exception to this is a patient coming in under worker's compensation. Please notify us immediately in that instance.

**I agree to the terms above, and acknowledge that in the event that there is an outstanding balance which fails to be paid within 120 days, my account will be turned over to a collection agency or taken to small claims court. I understand that should this happen, I will remain responsible for any collection an/or attorney fees as well as court costs. I understand and agree with the above financial policy:**

\_\_\_\_\_  
Name(print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

