



Holli Polito: Desired Embodiment

814.591.7857

# Office Policies

## Client Information

Client Name (print): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

*Please be advised as the structure of my schedule has changed, it is of utmost importance that the policies and procedures be acknowledged and followed. Due to my limited availability and constant demand, it is necessary that I enforce a secure cancellation policy.*

## Cancellation

A 24-hour notice is required for cancellation of an appointment, or you will be charged in full for the appointment. Payment is due before your next appointment.

## Tardiness

Appointment times are as scheduled and cannot extend beyond the stated time to accommodate late arrivals. Please be on time to your appointment.

## 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 may be waived.

## Financial Responsibility

This office is run on a cash basis: insurance is not accepted as payment. I will gladly supply you with a receipt should you wish to seek reimbursement from your insurance company. But I will NOT bill insurance companies directly, nor will I complete a HICFA form for any reason. Your signature below confirms your financial responsibility for all services regardless of insurance reimbursement.

## Confidentiality

All services provided and information shared in this office are under strict confidentiality. Only with written permission will information be shared or released to anyone outside of your session except as required by law. Legal exceptions include: a.) clear and imminent danger to you or someone else, b.) reasonable expectation that you will engage in or have engaged in dangerous or illegal behavior, c.) reasonable suspicion that a child or elder is being abused, d.) a court order.

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