



2017 Attendance & Cancellation Policy

Thank you for choosing A to Z Pediatric Therapy, LLC. We want to provide the best possible services to all of our patients. We will do our best to schedule appointments that meet your needs. Regular attendance is important to your/your child's success. We ask that you follow the attendance policies outlined below:

- _____ Initial 1. **Cancellations:** Please call or email us at least 24 hours in advance to cancel your appointment. A to Z Pediatric Therapy, LLC reserves the right to charge a fee for any appointment that is not kept or not canceled by giving 24 hours advanced notice. If you fail to follow these policies, you may be subject to a fee. We understand that unforeseen circumstances occur and these will be dealt with on a case by case basis. Insurance will not cover this fee.
- _____ Initial 2. **Repeated Cancellations:** Regular attendance is expected at scheduled therapy sessions. Planning, effort, and time go into each session. If repeated cancellations occur, you are likely to lose your time slot or services may be put on hold/terminated.
- _____ Initial 3. **Late for Appointments:** If you are more than 10 minutes late for your appointment, we reserve the right to cancel the appointment and consider it a missed appointment (see policy for missed appointments above). We reserve the right to consider this appointment as a late cancellation and charge a fee. If you are late for 3 or more sessions, we may put your services on hold until scheduling problems can be worked out.
- _____ Initial 4. **Clinician Cancellations:** If your therapist is not able to attend your appointment, you will be contacted as soon as possible. Please be sure that our office knows the best way to reach you. Every effort will be made to reschedule your appointment in a timely manner.

I agree to the attendance policies outlined above.

Print Patient's Name

Date

Parent/Guardian Signature

Relationship to Patient