## **Life Change Psychotherapy Cancellation Policy**

Your appointment time has been specifically reserved for you, therefore we respectfully require **24-hour notice of all cancellations**. Failure to give your therapist 24 hours' notice of cancellation will result in a **\$50 cancellation charge**, plus tax (**\$53.93**). Please note that insurance companies do not pay for late cancellations. The \$53.93 cancellation fee is the full responsibility of the patient, and payable at the time of your next session.

| - | Patient Signature           |
|---|-----------------------------|
| - | Patient Name (please print) |
|   | Date                        |