

## Cancellation Policy

Worthington Wellness Center would like to thank you for choosing Dr. Heather as your chiropractor. I want to make sure your experience is a positive one, and make every effort to ensure you receive the best care possible. To continue to deliver outstanding patient care it is necessary to be prompt for your appointment times and reduce cancellations.

Therefore, a new cancellation fee will be administered effective February 1<sup>st</sup> 2011! Cancellation to any appointment needs to be made **24 hours** in advance to give others the opportunity to use the time slot. Failure to cancel an existing appointment 24 hours in advance will result in a **\$35 fee** per appointment cancelled! This fee will be added to your account and will be paid on your next visit.

For new patients, the cancellation policy remains. Worthington Wellness Center will make every effort to remind you of the hour long appointment 24 hours in advance.

Should you have any questions or concerns in regard to this policy, please call us. Thank you for your understanding and cooperation in regards to this cancellation policy.

## Cancellation Policy

Worthington Wellness Center would like to thank you for choosing Dr. Heather as your chiropractor. I want to make sure your experience is a positive one, and make every effort to ensure you receive the best care possible. To continue to deliver outstanding patient care it is necessary to be prompt for your appointment times and reduce cancellations.

Therefore, a new cancellation fee will be administered effective February 1<sup>st</sup> 2011! Cancellation to any appointment needs to be made **24 hours** in advance to give others the opportunity to use the time slot. Failure to cancel an existing appointment 24 hours in advance will result in a **\$35 fee** per appointment cancelled! This fee will be added to your account and will be paid on your next visit.

For new patients, the cancellation policy remains. Worthington Wellness Center will make every effort to remind you of the hour long appointment 24 hours in advance.

Should you have any questions or concerns in regard to this policy, please call us. Thank you for your understanding and cooperation in regards to this cancellation policy.

---

Printed Name

---

Date

---

Signature

---

Date