

**FEES AND PAYMENT**

**REMEMBER:**

**A: INSURANCE:** Your appointment time is reserved for you. Once you have scheduled a session, you will be **expected to pay for it unless you provide at least 24 hours advanced notice**. Even if you have insurance, your insurance is not expected to pay for sessions cancelled with less than 24 hours Notice. You will be billed a \$65 cancellation Fee if you are utilizing insurance that is to be paid prior to the next session. It may be paid via check in the mail or Paypal.

**B: CASH:** If you are NOT utilizing insurance and paying Cash you will be billed the agreed amount of each session if you do not give 24 hour notice to cancel. Once you have scheduled a session, you will be **expected to pay for it unless you provide at least 24 hours advanced notice**.

Our agreed amount per session is \$\_\_\_\_\_.

Signature of Client \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Therapist \_\_\_\_\_ Date: \_\_\_\_\_

Should you be writing checks and a check should bounce, meaning insufficient funds in the account, you will be charged a \$10 processing fee plus the original amount. The original amount plus the \$10 fee is due in form of cash/money order before the next session in order to reserve your time. In a situation where your absence was beyond your control, (i.e. a true emergency, NOT a cough/cold or flu) and where time permits, I will attempt to reschedule your session within the same week but you may still be billed for a cancellation if there was less than 24 hours notice. If you are not feeling well and chose to do a Skype/Facetime or Phone call in place of our session because it is more convenient for you, that may be an option.

WAVE Counseling accepts credit cards, checks and cash. If you chose to use a credit card there is an **additional 4% charge**.

Signature of client (or person acting for client) \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

Signature of therapist Mark Brewer, LMFT /WAVE Counseling \_\_\_\_\_ Date \_\_\_\_\_