



Allyson Blythe, LCSW & Certified Life Coach

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Important Policy Information:

I am dedicated to providing the best possible care for you and want to ensure that you understand the following policies. By signing below, you agree to the following:

- to present your credit card and a photo ID at the time of your first visit.
- to notify the office of changes in any of my basic information (address, phone number, etc).
- **payment is collected at the time of service.** I understand that cash or check are accepted for all services. Credit cards, including HSA accounts, are also accepted.
- **to cancel any appointment with at least 24 hours advance notice. There will be an automatic full-fee charge for missed or late cancelled appointments. Email is the best way to convey basic information and appointment changes.**
- to pay for all services rendered, including collection fees and attorney fees up to and including court costs in the event of default.
- to pay any return check fees at the cost of \$35.00 each.
- fees and treatment options have been discussed and agreed upon. It is your right to pursue in-network services or to make changes to your treatment as you see fit.
- **to allow email messages to be sent as a form of communication. Email and text messages are not appropriate for emergencies.** Data transmitted over the internet is not secure and is at risk of being read by unauthorized third parties. Liability for this communication cannot be held by me and cannot be held responsible for safeguarding such information once it is delivered to me. You can revoke this authorization at any time in writing.

Printed Name of Client

Signature of Client (or Guardian)