

22 Oakwood Road
Huntington, NY 11743
P: (631) 223-8499



280 Madison Ave #202
New York, NY 10016
P: (347) 915-3044

CANCELLATION POLICY

At the start of services you and your therapist will agree on an appointment time that is reserved just for you each week. We require advance notice if you need to cancel an appointment. Advance notice allows us to accommodate your scheduling needs, for example, if you need to change your appointment time. It also allows us serve all of our clients in an effective and timely manner.

Please review the following cancellation policy carefully:

- In the event that you need to cancel your appointment, you must do so by **3:00pm on the previous business day**. For example, if you have a 6pm appointment on Wednesday evening, you must call by Tuesday at 3pm to cancel. If you have a Monday appointment, you must call by 3pm on Saturday.
- Please cancel your appointment by telephone at (631) 223-8449 and dial your therapist's extension. **Cancellations via text message or email will not be accepted.**
- You will be responsible for **the full session fee** if you do not cancel by 3pm the previous business day or do not show for your scheduled appointment.
- Fees charged as late cancellations or no shows are not reimbursed by insurance.
- All late cancellation or no show fees are due at the time of your next scheduled session.
- Two consecutive late cancellations/no shows or excessive cancellations will result in loss of your weekly session time and possibly termination of services. If you wish to continue in therapy, you will need to coordinate with your therapist to schedule a new appointment time.
- You will receive a courtesy email reminder 48 hours in advance of your scheduled appointment time. In the event that you do not receive the reminder, this will not negate the above policies or fees.

Your signature below indicates you have reviewed and accept the conditions of this cancellation policy while receiving services from Family Guiding.

(Printed Name of Client)

(Date)

(Signature)

(Parent/Guardian Signature if client is a minor)