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*Distinct Touch, The Bodywork Center, Inc.*

*Payment Agreement & Cancellation Policy*

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## *Distinct Touch, The Bodywork Center, Inc.*

3910 S Carefree Cir., Suite B  
Colorado Springs CO 80917  
(Tel) 719.471.3535  
(Fax) 719.329.0382

7850 Vance Dr., Suite 160  
Arvada CO 80003  
303.463.3306

### Payment Agreement & Cancellation Policy

Please read the following agreement. It explains your financial obligations while under our care and our policies regarding cancellations.

- 1) Payment is always due at the time of service.
- 2) We accept the following forms of payment:
  - a) Cash
  - b) Check
  - c) Debit Card
  - d) Visa
  - e) Master Card
- 3) We do not accept insurance, however if you have a PPO-style plan (these are plans that allow you to see doctors who are not part of your insurance company's provider network), we can do the following:
  - a) Provide information needed regarding services, labs, or imaging studies received to assist you in preparing a health insurance claim form that you can submit to your insurance company to request reimbursement of your charges with Distinct Touch.
  - b) We can never guarantee that your insurance company will reimburse you for your visits or cover the cost of your labs and imaging studies. You are fully responsible for the cost of your care at our office.
- 4) We do not accept barter arrangements.
- 5)

### NEW CLIENT APPOINTMENTS

All new clients are required to provide a valid credit card number, including expiration date and billing zip code, in order to schedule a new client appointment.

1. You will be charged a \$25.00 cancellation fee if:
  - a) You cancel your appointment with less than 8-hour notice;
  - b) You are a first time Groupon client who did not provide a 24-hour notice to cancel;
  - c) You arrive more than 10 minutes late for your appointment;
  - d) If you fail to show up for your appointment at all without notification.
2. A 50% deposit is required for BodyScan appointments and consultations.

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### **FOLLOW-UP VISITS**

Follow up clients are not required to provide a valid credit card number in order to schedule an appointment.

### **UNPAID ACCOUNTS**

Any client owing monies to Distinct Touch, The Bodywork Center, Inc. will not be scheduled for any appointments, eligible for loyalty programs, or sale pricing until the client account is paid in full. We are not able to carry client debt.

### **WHY THIS POLICY IS NEEDED**

Regretfully, Distinct Touch, The Bodywork Center, Inc. has been forced to institute this Payment Agreement and Cancellation Policy due to a large volume of last-minute cancellations, scheduling changes, and “no-shows.” We have a very busy practice and assuring that all our established clients have access to their doctor when necessary is a constant challenge. When you cancel or reschedule with adequate advance notice, it is more likely that another patient in need will be able to use your time-slot. When you cancel or reschedule at the last minute, or fail to show for your appointment, you are depriving another patient the care they need.

New patient visits require our staff to block out large time slots, making last-minute cancellations and rescheduling of visits even more problematic. We spend an inordinate amount of time and energy with each and every one of our new clients because we are committed to providing the highest quality care to be found anywhere. Again, please be aware that when you cancel or reschedule at the last-minute you are depriving care to another patient in need.

### **PHONE CONSULTATION CHARGES**

Distinct Touch, The Bodywork Center, Inc. charges for phone and office consultations. They require the same time and expertise as office visits.

- 1) Billing for phone consultations is, however, at staff’s discretion. You may not be charged if the nature of the consultation is uncomplicated, such as taking a minute to answer a question about your treatment protocol.
- 2) If any type of extended discussion ensues or if a number of questions need to be addressed and exceeds two or three minutes, it is likely your doctor will charge for the phone or office consultation.

By signing this payment agreement & cancellation policy, you are indicating that you understand and agree to the terms of service explained above. You are also indicating that you have given your permission to us to charge your credit card if any of the above stipulations apply to you.

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(303) 463 3306 Fax same

Print Name of Patient or Legal Guardian: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Type of Card: Visa MC Card Number: \_\_\_\_\_

Expiration: \_\_\_\_\_ Security Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_