

PsychArizona

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Cancellation Policy

We are often not able to fill time slots when appointments are cancelled without 24 hours advanced notice. Therefore, we need to implement the following policy.

Credit Card Authorization

I, _____ on _____ understand that if I do not cancel my appointment within 24 hours of the appointment time, I will be charged for the missed appointment. I agree for that fee to be charged to the following card.

Credit Card Type: _____ 3 digits on back of card _____

Credit Card Number: _____

Expiration Date: _____

Name on Card: _____

Address and Zip Code of Card Mailing Address: _____

Signature: _____

Printed Name: _____