

PATHWAYS

Center for Learning & Behavioral Health, LLC

No Show/Late Cancellation Policy

The Clinical Staff at PATHWAYS requests that you give at least 24 hours notice if you will not be able to make a scheduled appointment. If a Monday appointment needs to be cancelled a call must be received on Friday by 3pm. With sufficient notice we can usually offer your appointment time to another patient and fill that slot.

Please be aware that if we **do not receive at least 24 hours notice** you will be charged a fee of **\$75.00**. Due to a variety of extenuating reasons; which may include but are not limited to: illness and car trouble, and in order to be fair to all patients, there can be no exceptions to this policy. We also understand that repeated no shows may indicate that someone is not yet ready to commit to treatment at this time. This should be discussed with your therapist so that appropriate planning can take place.

By signing below, I hereby understand and agree to comply with the above no show/late cancellation policy.

Signature of Patient/Guardian

Date

Signature of Witness

Date