



new client information

PAYMENT:

Unless other arrangements have been made, payment is due at the time of the appointment. Cash or checks are accepted, and checks can be made payable to *Neighborhood Nutrition*.

CANCELLATION:

Individual appointments are scheduled for a specific time. Cancellation requires a 24 hour notice.

MEDICAL INSURANCE:

Medical insurance companies may or may not provide reimbursement for nutrition services. Please check with your insurance provider regarding their policy on reimbursement for nutrition services. While Neighborhood Nutrition does not directly bill insurance companies, a form (superbill) will be provided that may be self-submitted for potential insurance reimbursement.

I, the undersigned, have read and agree to the conditions as outlined above in that:

1. I understand that I will be responsible for payment at the time services are provided by Neighborhood Nutrition.
2. I understand that a change or cancellation of my appointment requires at least 24 hours notice, or I may be charged for the appointment.
3. I understand that the paperwork I receive from Neighborhood Nutrition must be *self-submitted* to seek medical reimbursement.
4. I will not hold Neighborhood Nutrition liable for any damages incurred while receiving services.

Signature of responsible party: _____

Date: _____