



CANCELLATION POLICY

Effective May 6, 2013

Appointments that are cancelled and rescheduled by phone 24 hours prior to the appointment will incur no additional charges. Cancellations made the same day will incur a full charge as I am not able to replace the appointment. Cancellations the night before for an early morning appointment or same day cancellations will incur a half price charge for the scheduled length of the appointment, even if the appointment is rescheduled. If you reschedule right away, I will be less likely to charge for missing an appointment time. I am not an ogre!!

You are paying for the time slot. If you are late for your appointment, you will be charged for that session from the time it was supposed to start. Please call 215-272-6774 at any time with any changes to the schedule. Sending an email is not adequate as I may not receive the email until after the appointment time. Please realize that I am not in front of my computer all day. You must call to cancel or reschedule the appointment in order to avoid being charged for the session.

Missing your appointment (aka. no show) will incur full charge for the appointment plus an additional 10% fee for my driving time, if applicable. Forgetting to 'write the appointment in your calendar' is not a valid excuse for missing an appointment. I will try my best to confirm appointments, but since most are scheduled within 1 weeks time, a reminder seems unnecessary. Emergency situations will not be included in this policy.

Sessions that are pre-purchased as in packages, will be forfeited after 1 year if not used. It is not my responsibility to remind you that you have sessions left. I will keep track of sessions used most of the time, but unused sessions will be lost after a year of purchase.

Thank you for your understanding and cooperation. I look forward to working with all of you to help you reach your goals nutritionally. To YOUR health!

Founder, President
 Nutrition in Motion, LLC

I have read and agree to this policy. I agree to pay any charges resulting if I do cancel within the parameters of this agreement. If you do not feel comfortable with providing PayPal info, please check here and sign the document agreeing that you will pay for the missed appointment by either cash or check.

Name	Date	PayPal account (email address used for PP)
Signature		email to use for communication if diff than PP
MC/VS		exp date/ 3-digit code on back

 Billing Address