



Better Life Acupuncture  
238 Bedford Street  
Lexington, MA  
617 645-0073  
www.betterlifeacupuncture.com

### Office Policies

#### ***24-Hour Cancellation/Rescheduling Policy:***

Please allow 24 hours advance notice if you must make an appointment change or cancellation. Changes or cancellations made within 24 hours of the appointment will be charged a \$50 cancellation fee.

#### ***Late Arrivals:***

Because proper patient care requires the full amount of time allotted for visits, patients arriving more than 15 minutes late may need to reschedule and will be charged the late cancellation/rescheduling fee. If a patient is late to treatment and the treating practitioner is still able to see the patient, the treatment will be shortened to end at the allotted time so as not to infringe on another patient's appointment. However, the patient will still be responsible for the full cost of the scheduled treatment.

#### ***No-Shows:***

Patients who do not show up for an appointment without calling to cancel or reschedule will be charged the full amount for their visit. Patients may not continue treatment at Better Life Acupuncture without first paying any outstanding late cancellation/no show fees.

#### ***To ensure a peaceful and optimal treatment environment:***

Better Life Acupuncture strives to maintain a peaceful atmosphere for our clients, and we ask that all cell phones be silenced while in our office. Children may not be left unattended, and we ask that clients keep their voices down in our waiting room to allow other clients to receive maximum relaxation during their treatment.

For your treatment, it is best to wear comfortable, loose-fitting clothing. It is also recommended that you have a light meal before treatment, but not be overly full.

#### ***Payment:***

Payment in full is expected at time of service. We accept MasterCard, Visa American Express, Discover, personal check payable to Better Life Acupuncture, and cash.

Patient (or Guardian if patient is under 18 years of age) Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

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