

**Policies**

**Cancellation**: All appointments require 24 hours’ notice for cancellations. Any time a client cancels within 24

hours or does not show up for an appointment and gives no notice (no show, no call), payment in full is expected. If the practitioner cancels, no fees will be charged and the client will be given opportunity to reschedule.

**Lateness**: Any time a client is more than 15 minutes late, the session will be cancelled and payment in full

will be required. If the client is less than 15 minutes late, the session will be shortened and paid for in full. If the practitioner is late, the session price will be lowered to reflect the actual session length OR the practitioner will make up the time as agreed upon with the client.

**Illness/Emergencies**: In the event of illness or emergency, please cancel your appointment. Payments

associated with appointments cancelled due to authentic illness/emergency will be dropped.

**Rescheduling appointments**: Appointments cancelled due to a client being more than 15 minutes late or due

to no show/no call may be rescheduled and associated cancellation fees will be reduced from 100% to 50%. Payment in full for the rescheduled appointment is due at the time of service.

**Payment**: Payment is due at the time of service, unless prior arrangements have been made. Cash, Check,

Credit Cards, and Sage Healing Arts gift certificates are accepted.

**Returned Checks/ Insufficient Funds:** In the event of a returned check or insufficient funds, payment will be

due immediately. The client is responsible for any fees incurred by Sarah Freese and or Sage Healing Arts, due to checks being returned/insufficient funds.

**Sexual Misconduct**: All treatments at Sage Healing Arts are safe and sacred, and are never sexual. All sexual

conduct during appointments is prohibited. Any sexual comments, suggestions or contact made to the practitioner by the client will not be tolerated. In the event of such sexual contact, comment, or suggestion, the session will end immediately and payment in full will be required. The practitioner will never make sexual comments, suggestions, or contact to the client. The practitioner will never date clients.

**Clients under age 18:** All clients under the age of 18 must have a parent or guardian consent to treatment.

Signatures of the parent/guardian are required on all client paperwork.

**Pregnancy**: The practitioner is trained in and offers prenatal massage. Any woman who maintains a healthy

pregnancy is fit for treatment. The client must continually inform the practitioner of the state of health of the pregnancy so proper treatments can be offered.

**I have read, understand, and agree to abide by the policies listed above. I have asked for and received clarification on any and all points I did not understand.**

Client Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guardian Signature (of client under age 18) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_