

Dr. Nancy Kirsner, Ph.D., T.E.P., P.A., Certified Positive Psychologist

Oak Plaza Professional Center
8525 S.W. 92nd Street, Suite A-3

Miami, FL 33156

[Tel:\(305\)274-8283](tel:(305)274-8283)

nancykirsner@gmail.com

CANCELLATION FEE POLICY

Please read carefully.

Your signature at the bottom denotes your understanding and compliance with this office policy.

To My Clients:

As I welcome you to my practice, I want you to know I am appreciative of your choosing me. I consider it my life's work and deepest privilege to work with you and I value the time we spend together.

I find it necessary to be clear concerning late cancellations of appointments. My office policy is that less than twenty-four hours' prior notice always carries a charge of your regular session fee.

I am aware that emergencies arise in our lives: bad weather, traffic jams, business events, even last minute illnesses. However, due to the nature of my clinical practice, without 24-hours' notice, I am unable to call clients to fill the hour which is reserved for you. Should these circumstances arise, I am happy to speak with you on the phone during your reserved time.

I hope you can understand and respect my position as I respect your reserved appointment time. I ask that you sign this form so that there will be no confusion about this office policy.

Thank you,

Dr. Nancy Kirsner

Client signature

Date: