



# Northland**clinic**

therapeutic services tailored to your needs

**Welcome** to Northland Clinic. We look forward to working with you and ask for your cooperation with respect to a very important matter related to scheduled appointments.

When you make an appointment with a therapist, that therapist automatically reserves at least 45 minutes of his/her time exclusively for you. Therefore, if for any reason you are unable to keep your appointment, we ask that you give your therapist at least 24 hours notice prior to a cancellation.

I agree to contact Northland Clinic and provide at least 24 hours notice in the event that I am unable to keep my appointment. **Appointments that are not kept/uncancelled or cancelled with less than 24 hours notice will be charged to you** (*insurances cannot be billed for missed appointments*).

If you have any questions about this, please feel free to ask. We thank you for your anticipated cooperation in this matter.

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*Insured or Guardian Signature*

\_\_\_\_\_  
*Patient Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*