

VIC Financial and Communication Policy Minors

Effective Date: 6/5/2025

Name

Legal first name

Last name

Relationship

Thank you for choosing Valley Integrative Chiropractic (VIC) for your care. We are committed to transparency and simplicity in all financial matters. Please take a moment to review our financial policy.

Payment Policy

- **Payment is due at the time of service.** We accept credit/debit cards, HSA/FSA cards, Google/Apple Pay, and Link. We will accept cash or checks in office but not for first appointments.
- **All services are self-pay.** VIC does not accept or bill insurance, including Medicare, Medicaid, or Workers' Compensation.
- **Superbills** may be provided upon request for patients wishing to seek reimbursement from their insurance company. However, VIC does not guarantee reimbursement and cannot assist with insurance claims.

Appointment Types & Fees

A clear fee schedule is available on our website [\[ValleyIntegrativeChiro.com\]](https://ValleyIntegrativeChiro.com) and through our booking system [\[bit.ly/BookWithDrBecca\]](https://bit.ly/BookWithDrBecca).

Prices vary based on appointment type and time reserved and are billed at \$240/hour, in 15 minute increments. For example:

- 60-minute Initial Evaluation: \$240
- 20-minute Routine Adjustment: \$80

Additional costs may apply for any recommended supplements, essential oils, homeopathics, or other wellness products.

Credit Card on File

To simplify billing, a valid credit card is required to be stored securely in our system at the time of booking. This card may be used for:

- Payment at the time of service
- Late cancellation or no-show fees (see below)
- Supplement purchases made in-office

Late Cancellation / Missed Appointment Fee

Your time and ours are valuable. Due to high demands for appointments, we kindly ask for:

- **48 business hours' notice** is required to cancel or reschedule any appointment without a fee. Please note our work week is Tuesday through Saturday, closed Sundays and Mondays. Business hours refers to the hours posted on our website, valleyintegrativechiro.com
- Appointments canceled or rescheduled with **less than 48 business hours' notice** will be charged a **Late Cancellation Fee of 50%** of the scheduled appointment fee.
- **No-show appointments** (missed without any notice) will be charged **100% of the scheduled appointment fee** and may result in **dismissal from the practice**.
- We understand that unexpected situations may arise. If something unavoidable occurs, please contact us as soon as possible so we can work with you appropriately.

New Patient Deposit Policy

- A **deposit equal to the first visit fee** is required at the time of booking any New Patient appointment.
- This deposit will be **applied to your visit** when you attend as scheduled.
- If you **cancel or reschedule with less than 48 business hours' notice**, the deposit will be **non-**

refundable. See our hours at valleyintegrativechiro.com

Product Purchases

- Supplements and other wellness products purchased in-office are **non-refundable** once opened or used or exposed to extreme heat.
- A receipt will be provided for all purchases; tax will be added where applicable.

Communication & Contact Preferences

Using the contact information provided, you may receive email or text reminders about upcoming appointments and account balances. By signing this policy, you consent to such communications. Please notify us if your contact information changes.

Financial Hardship / Special Circumstances

We strive to offer accessible care. If you are experiencing financial hardship, please speak with us directly so we can discuss available options. We may be able to suggest alternative appointment types or frequency of care that better fit your budget.

Client
I have read, understood, and agree to the Financial Policy of Valley Integrative Chiropractic. I am the parent or legal guardian of the above named minor patient, and in signing this document, I understand that I am financially responsible for all charges incurred. I affirm I have the legal right to make these decisions.

X

Print name:

Date: