FAMILY PSYCHOLOGICAL SERVICES
of Lakeland

PATIENT SERVICES AGREEMENT WITH FAMILY PSYCHOLOGICAL SERVICES OF LAKELAND

PATIENT NAME: _____ PATIENT DOB: _____

Welcome to Family Psychological Services of Lakeland. We look forward to working with you in a professional and caring manner.

Before your session today, we ask that you read important information about our practice. You are asked to initial or sign your name to indicate that you have received the information.

Also, you will be presented with our Patient Services Agreement prior to your session. This Agreement describes in more detail what you can expect from Family Psychological Services of Lakeland. You will be asked to sign your name to indicate that you have received the information.

ACKNOWLEDGEMENT OF RECEIPT OF PATIENT SERVICES AGREEMENT:

My signature below serves as acknowledgement that I have received from Family Psychological Services of Lakeland a Patient Services Agreement which contains a Notice of Privacy Practices in accordance with the Health Insurance Portability and Accountability Act (HIPAA).

_____ _____
SIGNATURE PRINT NAME

_____ _____
RELATIONSHIP TO PATIENT EFFECTIVE DATE

APPOINTMENTS AND CANCELLATION POLICY:

The appointment time scheduled with you is only for you. That is, we do not double-book appointments. You can be confident that you will be seen very near your scheduled appointment time.

We expect you to provide us with **48 hours notice** should you need to cancel or reschedule an appointment, so we may offer the time to another person. If you miss an appointment or fail to give **48 hours notice**, you will be charged **$75.00 for your appointment time**. This fee will need to be paid prior to future appointments being scheduled. If you have any prior appointments and you do not pay the fee; the appointments will be cancelled.

(PLEASE INITIAL HERE -→) _____

RETURNED CHECKS:

There is a $50.00 fee for any check returned by the bank. In the case of insufficient funds, we will automatically re-present the check for payment. If the check is returned a second time; you will be asked to bring in a cashier's check, money order, or cash payment for the amount of the check plus fees before another appointment is scheduled for you.

(PLEASE INITIAL HERE -→) _____