



Yanok PT: Care and Considerations
NOTICE

Consent for Care and Treatment: You, the undersigned, do hereby agree and give your consent for Yanok PT to furnish fitness assessments or medical care and treatment to you considered necessary and proper in diagnosing and/or treating your physical condition.

Benefit Assignment/Release of Information: A photocopy of this assignment is to be considered as valid as the original. You hereby authorize said assignee to release all information necessary, including medical records, as required.

Financial Policy Statement: Yanok PT does not interact with any insurance carriers, putting the responsibility of any reimbursement that a client wants to receive on the client. **Yanok PT does not accept the responsibility for any incorrect information provided by your insurance carrier regarding your insurance benefits. We require that payments that are due be paid at each visit.** When you pay by check, you expressly authorize Yanok PT, if your check is dishonored or returned for any reason, to electronically debit your account for the amount of the check plus a processing fee of up to the state maximum legal limit (plus any applicable sales tax). You understand and agree that if you fail to make any of the payments for which you are responsible in a timely manner, you will be responsible for all costs of collecting monies owed, including court costs, collection agency fees, and attorney fees.

Cancellation Policy: In order to accommodate patients' scheduling needs, Yanok PT **requires notification of appointment cancellations no later than 24 hours prior to the scheduled appointment.** If you cannot provide adequate notice a **\$30 missed visit fee** will be applied to your account. The fee is not billable to insurance carriers.

I am 18 years of age and am competent to contract in my own name. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release.

Patient Signature: _____ **Date:** _____

Responsible Party Signature (if under 18): _____ **Date:** _____

Yanok PT

Signature: _____

Date: _____