

Office Policies at SC Spa

Client Information

Client name: _____ Date: _____ Date of Birth: _____

Dress Code

We recommend that all clients wear comfortable clothing to the session. Please be aware that we are not responsible for any missing personal items. Keep your treasures at home including jewelry and watches!

H2O Essential

Stay Hydrated. Drinking water before and after a healing massage is essential to your well being. Massage assists the body in disposing toxins through the kidneys, organs and lymphatic system enhancing the body's immune system.

Client Confidentiality

All personal information obtained from clients whether through the intake form(s) or within a session is considered confidential.

Our Therapists (Team)

We only have highly qualified licensed and experienced professionals to meet your needs. We will soon be introducing the SC Spa team!

Appointments

Commonly reserved by appointment. Walk-in clients are welcomed based on availability. Some appointments require a valid credit card on file to hold a reservation.

Cancellation

A 24-hour notice is required for cancellation of an appointment, or you may be charged in full for the appointment. Payment is due before your next appointment. Cancelling an appointment after the prescribed 24 hour period may result in a charge.

Tardiness

Appointment times are as scheduled and cannot extend beyond the stated time to accommodate late arrivals. Please be on time to your appointment. To maximize your initial session please come in 10 to 15 minutes early to complete required intake form(s).

Sickness

Massage/bodywork or facials is not appropriate care for infectious or contagious illness. Please cancel your appointment as soon as you are aware of an infectious or contagious condition. To reschedule a doctors note will be recommended. If it is within the 24-hour notice period, the cancellation fee may be waived.

Signature: _____ Date: _____

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If this office is providing billing services, please be advised of our billing policies.

Cancellation

We do not bill insurance companies for missed appointments or late cancellations. You are responsible paying the missed appointment/Late cancellation fees.

Financial Responsibility

Once your insurance is verified, we will bill and accept payment from your insurance company for covered services. In the event that the insurance company denies payment or makes partial payment, you are responsible for the balance, deductibles and co-pays. Your signature below confirms your financial responsibility for all services regardless of insurance reimbursement.

Assignment of Benefits

Your signature below authorizes and directs payment of medical benefits to the massage/bodywork practitioner for services provided by this office.

Release of Medical Records

Your signature below authorizes the release of all of your medical records on file in this office, for the purpose of processing your claims, to the following: your attorney, the healthcare providers attending to this condition, and the insurance case managers. Medical records will not be edited unless otherwise stated in an exclusive release of medical records signed through your attorney.

Signature: _____ Date: _____