











Flowering Journey Wellness Policies

Thank you for choosing Flowering Journey Wellness for your relaxation needs. Please read the following policies and expectations and initial next to each bullet once you have read and fully understand its meaning:

-  _____ Payments are preferred in cash. Local checks may be accepted from established clients. Credit/Debit cards may be used with an additional fee of 3.5% to cover the processing fee. No traveler's checks will be accepted.
-  _____ Returned checks will result in immediate requirement of repayment in cash, plus a \$25 returned check fee paid in cash only. Additional fees may be applied if full cash payment is not fulfilled within 24 hours of notification of returned items. Clients presenting checks with insufficient funds may be required to pay cash for all future services.
-  _____ Full payment is always due at the time of service and client must verify that they have the proper amount of payment before the service begins. All fees are subject to change. Client should always verify prices before beginning a service. Postdating checks is not permitted. Failure to pay will result in legal charges and unpaid balances will be sent to collections.
-  _____ All services and products purchased, including gift certificates, are non-exchangeable & non-refundable.
-  _____ Arriving late for an appointment may result in a shorter session at full-price.
-  _____ Client must give at least 24 hours notice of appointment cancellation in order to avoid a fee of 50-100% of the scheduled service amount.
-  _____ No-Show clients, clients cancelling less than 3 hours before a scheduled appointment, and clients cancelling more than two consecutive times may be billed for the entire service and/or required to pre-pay in order to be rescheduled.
-  _____ Minors under the age of 18 must be accompanied by a parent or legal guardian at all times and must be receiving a service. No children are otherwise allowed during treatment sessions.
-  _____ Clients should be prepared to make their session as relaxing as possible by muting all cell phones and electronics, as well as informing the therapist of any special accommodations needed, and clarifying all questions and concerns.
-  _____ Clients should arrive hygienically prepared for their session.
-  _____ All clients must complete and sign all required forms before services can begin.

- ✚ _____ All clients must inform the therapist at the start of every visit if they are under any new prescribed medical or over the-counter oral or topical treatments, or have been diagnosed with any new illnesses or injuries.
- ✚ _____ Clients may agree to follow therapist's advice for post-session care to achieve the best treatment results.
- ✚ _____ The therapist is not responsible for lost items or items left behind.
- ✚ _____ The therapist retains the right to refuse service to any suspicious persons, those appearing to be under the influence of any drugs or alcohol, or those appearing to have signs and symptoms of any disorder that may contraindicate the treatment to be given. Please be respectful of the health of others and reschedule if you are sick!
- ✚ _____ Any sexual advances, sounds, comments or innuendos, or rude or violent behavior will result in immediate dismissal and will be reported to legal authorities.

I have read and understand the above list in its entirety, and agree to abide by all policies & client expectations listed.

Client Signature: _____ Date: _____

☐ ***Check here if you are signing as the legal guardian for a minor under the age of 18.***