**A close up of a logo

Description automatically generated**

**31735 Riverside Drive Suite I Lake Elsinore, CA 92530**

**(951) 291-8849 email:** [**info@serenitywellnesscenter.net**](mailto:info@serenitywellnesscenter.net)

[**www.serenitywellnesscenter.net**](http://www.serenitywellnesscenter.net)

**CANCELLATION POLICY**

 Your appointments are very important to the Serenity Wellness Center team.  They are reserved especially for you.  We understand that sometimes schedule adjustments are necessary.  Therefore, we respectfully request at least a 24-hour notice for cancellations or rescheduling of appointments.

Please understand that when you forget, cancel, or change your appointment without giving enough notice, we miss the opportunity to fill that appointment time and clients on our wait list miss the opportunity to receive services.  Therefore, we have a strictly enforced 24-hour cancellation and rescheduling policy.

Any missed, late, cancelled, or changed appointment without a 24-hour notice will result in a $50 charge. The appointment may be taken off a contract/package or charged individually.

As a courtesy, your appointments are confirmed the day before your scheduled appointment by a courtesy phone call, email and/or text messaging because we know how easy it is to forget an appointment you booked months or even weeks ago.  From this confirmation call and or email/text, you have the option of the following without a charge:

* confirm your appointment in the email;
* reschedule/change/modify your appointment;
* cancel your appointment;
* respond back by email with any changes or issues;
* call our office number which is provided in the email for customer service;

Please understand that it is your responsibility to remember your appointment dates and times in order to prevent any missed appointments which result in a cancellation fee.  Not receiving an electronic notification of your appointments from us the day before is not sufficient reason to miss an appointment if the original confirmation notification was received timely.

Any late arrival will shorten your appointment time and will not be made up by running into the next client’s scheduled appointment.  More than 15 minutes late will result in needing to reschedule as well as result in a $35 missed appointment fee.

All appointments must be held with a valid credit card at the time of booking.  A credit card hold transaction may be made on your credit card to reserve the appointment time.  Your credit card information is stored with full encryption.

Emergency absences will be considered on an individual basis by Serenity Wellness Center.  You may request not to be charged for the late cancelled session in writing within 7 days if you feel such action is warranted.  Serenity Wellness Center will make the decision to honor your request on a case-by-case basis and will respond back to you in writing within 7 days.

It is mutually understood that if a cancellation is due to circumstances beyond any of our control, such as power outage, unfortunate incidence, or weather that requires you or us to have to cancel or be closed during regular business hours, we will reschedule your existing appointment and no discount or charges will apply.

Serenity Wellness Center stands by our policies.  We feel that it is only fair that we honor the same policies to our clients.  If we have to cancel a client with less than 24 hours’ notice of the appointment scheduled, we will honor the same policy and your next appointment will be discounted.  Serenity Wellness Center reserves the right to modify a scheduled appointment to a different Staff Member during the same time allotment if circumstances arise without prior approval of the client.

The 24-hour cancellation policy gives us time to inform our wait list clients of any availability, as well as keeping our staff schedules filled, thus better serving everyone.  Serenity Wellness Center policies are presented and provided in the best quality and tradition of excellent service for our established and future clientele. Thank you for viewing and supporting our 24-hour cancellation and rescheduling policy criteria!

\_\_\_\_\_\_\_\_\_\_\_\_\_\_Initial

By signing below, I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, acknowledge and certify that I have read and understand the “Consent, Release and Indemnity” agreement for this treatment, and that I am signing it voluntarily. Should any pain or discomfort occur, I will immediately notify the technician. I understand that I must be at least 18 years old to participate in this treatment. I understand that all sales are final, and refunds are not permitted.

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Technician: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_