

Journey to Wellness Healing Center Policies

Financial Policy

All fees are due at time of booking to ensure we get the most out of each session without worry about collecting fees during that time. All fees for purchases of herbal supplements, essential oils and other items are due at time of purchase. We accept cash and all major credit cards for those items.

Cancellation Policy

To ensure the best availability for our clients, and as a courtesy to our practitioners, if you need to cancel your appointment for any reason, please do so in the specified amount of time below:

- Initial Consultation 48 hours
- Follow-up Session 24 hours

Our policy is as follows:

- Same-day cancellations or no-shows for an *Initial Consultation* will result in a \$60 fee.
- Same-day cancellations or no-shows for any Follow-up Session will result in a \$40 fee.
- The only exception to this policy is a true emergency. If that is the case, please contact
 your Practitioner. Please note that work- and school-related events are not considered
 an emergency.
- If you are late to your scheduled time, Journey to Wellness Healing Center has the right to reschedule your appointment.
- You have the ability to cancel and/or reschedule your appointment(s) on our website, however, if you have any difficulties in doing so, please send an email to info@journeytowellnesshealingcenter.com and we will help you.
- You may be unable to schedule future appointments if you consistently arrive late to your appointments, fail to attend appointments, or cancel your appointments on short notice.

Insurance Policy

Unfortunately, these services are not covered by insurance so we will not send anything to or bill your insurance. It is up to you to research and determine if these services and/or products are covered by any HSA or FSA plan you may have.

Return Policy

Herbal supplements and essential oils may be returned within 30 days of purchase if unopened and in non-damaged original packaging. All sales are final for all other products.

I have read and agree to these policies. Yes No	
Print Name:	
Signature:	
Date:	