

Chiropractic Nutrition Clinic

**2012 South Main St Suite 500A
Wake Forest, NC**

Dr Barry P. Swindler

Payment Policies

Payment is due at the time service is rendered unless arrangements were made in advance. We will consider accepting insurance assignment once attached verification forms are completed. Payments can be made by CASH, Personal CHECK made out to (Chiropractic Nutrition Clinic).

Missed Appointments

A \$40.00 “No-Show” fee will be charged for missed appointments or failure to give 24 hours notice if you must cancel. In an emergency, we may waive the “no-show” fee. The \$40.00 charge is payable at your next appointment.

Returned Checks

A \$20.00 fee will be charged if a check is returned by your bank.

I, _____ have read, understand and agree to abide by the payment policies of Chiropractic Nutrition Clinic as outlined.

Patients signature

Date