

# Nourish

counseling

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## **CANCELLATION POLICY AND PAYMENT ON FILE**

When you make an appointment with me, you are reserving my time, my space, and my mind.

If you need to cancel and reschedule, please do so 24-48 hours in advance so that I may attempt to fill your time slot from my waiting list. All clients must have a credit card on file in the event of no-shows or late cancellations.

**I understand that any cancellation of an appointment must be made a minimum of 24 hours before the start time of the appointment. If I cancel late or do not show up, I understand that I will be charged the full rate for that appointment. Appointments missed due to illness will be charged \$50.**

**My signature below affirms that I have read and understand and agree with the statements above.**

Client's name: \_\_\_\_\_

Credit Card number: \_\_\_\_\_

Expiration Date and 3-Digit Code: \_\_\_\_\_

Zip Code on the account: \_\_\_\_\_

Client or Signature: \_\_\_\_\_

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

Therapist's Signature and Date: \_\_\_\_\_