

O'Malley Chiropractic Health Center, LLC
78 Beaver Road, Suite 1A
Wethersfield, CT 06109
Phone: 860.257.9400

CANCELLATION POLICY

I, _____ am aware that this office requires a minimum of 24-hour advanced notice to cancel an appointment. If I do not provide 24-hour notice, I hereby authorize O'Malley Chiropractic Health Center to charge me a **\$50.00** surcharge for a missed office visit. I understand that this charge cannot be billed to an insurance carrier.

Patient Signature

Date

Authorized Provider Signature

Date