

Seacoast Neurofeedback, LLC

Name _____

LENS FEE SCHEDULE AND POLICIES:

The per session cost of low energy neurofeedback, or the LENS, is \$95 with a 6 session minimum paid in advance (\$528). This requires a weekly session commitment for the 6 week period unless otherwise instructed. Sessions beyond the 6 session minimum are \$95 each and all sessions over 15 are \$50.

I currently do not take any health insurance. Please check with your insurance company to see if your HSA will pay for the LENS. Cash or credit cards only please. I do not do superbills.

If there is no movement by the 6th session I will refer you to the appropriate practitioner.

Cancellation policy:

24 hours advance notice is required for cancellation. Failure to cancel within the 24 hour period will result in the loss of one paid session. There will be a charge of \$95 for ea. cancelled session without notice after the 6 session minimum.

Cancellation of the LENS before the 6 session minimum will result in forfeiture of the remaining balance.

Please respect other clients by arriving on time for your appointment. Lateness may result in the need to reschedule your appointment at which time you will forfeit 1 session. If after the 6 session minimum you will be required to pay the \$95 session fee.

Your signature below indicates you acknowledge and agree with this policy.

Signature _____ Date _____