



3145 E. Chandler Blvd 110-117, Phoenix, Arizona 85048 | Phone 602.828.2619 |

Cancellation and No-Show Policy

A solid partnership between the therapist and the family can create positive benefits for the child. A firm commitment to the therapeutic process is necessary for the child to receive these benefits. The therapists at Mariposa Speech Services support this commitment to every child they treat. We ask that the families also recognize the importance of doing their part to be present for all therapy sessions.

Your child's therapy appointment is the equivalent of a doctor appointment and should not be cancelled for reasons other than illness, family emergencies, or planned family vacations.

We understand that these circumstances do arise and makes it necessary to postpone therapy services. Our therapists will make every effort to accommodate a make-up session in these instances. If it is necessary to cancel therapy due to illness or emergency, please notify your therapist as soon as you know you will be unable to maintain your scheduled appointment.

A clinic appointment is considered a 'no-show' if the patient does not attend the scheduled therapy appointment and does not call to cancel the session.

A home-based therapy appointment is considered a 'no-show' if the therapist arrives at the scheduled time and the family is not at home, does not answer the door, or is unable to participate in the therapy session for any reason and has not called the therapist to cancel the appointment.

If we do not receive notification and the child is not present for the scheduled therapy appointment, a \$25.00 fee will be assessed.

Please also note that we reserve the right to discontinue services if there are 2 or more cancellations or 2 or more no-shows.

Mariposa Speech Services values the relationship we have with your family and we believe adherence to this policy will strengthen that relationship and create a positive therapeutic experience for your child. Please contact our office manager Lisa Laforest llforest@mariposaspeech.com if you have any additional questions.

I hereby acknowledge that I have been presented with the Mariposa Speech Services, Inc. Cancellation / No Show Policy. I have read this notice and understand the terms.

Parent / Guardian Signature Date

Printed name

Name of child