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Policies Acknowledgement Form

Hello and welcome!

I wanted to provide this concise list of important policies concerning your healthcare with me. Please read each item and initial, then sign the document at the bottom.

If you have any questions about this or any other form, please feel free to ask in person, by phone, or by email. I encourage your questions and participation in all aspects of your health care.

Office visits are currently available on Saturdays by appointment only. My office hours are between 10:00am and 6:00pm. You may schedule by phone, email, or online at www.angiejacksonlac.com. Same-day appointments may be available online but must be booked at least 2 hours in advance. Initials_____

The fee for your first office visit is \$150 and subsequent office visits are \$120. Payment for all services is due at the time of the visit, unless a previous arrangement has been made with me. Initials_____

I am also providing in-home treatments by appointment only. You may schedule with me by phone or email. Please note that these appointments **cannot** be booked online and are **not** available on Saturdays.
Initials_____

The fee for your first in-home treatment is \$185 and subsequent in-home treatments are \$155. Payment for all services is due at the time of the visit, unless a previous arrangement has been made with me. Initials_____

A fee of \$75 will be assessed for appointments missed or cancelled without a 24-hour notice. Initials_____

If you have missed your appointment due to an emergency, please speak with me as soon as you can. Initials_____

To give me permission to contact you by phone or email and leave a message that may contain appointment or medical information if you are not available, please initial here. Initials_____

Your signature

Your printed name

Date
