



Today's Date: _____

Client Late Cancellation and No-Show Contract

This contract reflects my commitment to attend my sessions scheduled with Through the Trees Therapy. I commit to attending my sessions consistently for the next 30 days without canceling my appointment. After these 30 days of consistent attendance of scheduled sessions, I will reassess with the therapist the desire to continue on with Through the Trees. If within this 30-day period I cancel an appointment for any reason outside of personal or family emergency and/or no-show to a scheduled appointment, my services with Through the Trees Therapy will be terminated upon that date.

I understand that I am more than welcome to return to Through the Trees in the future if my services are terminated. I may return after a 60 day period, if I am ready to commit to focusing on my therapeutic goals and attending therapy consistently. By signing this document, I acknowledge the understanding that my services will be terminated if this contract is broken.

Client's Signature

Clinician's Signature

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