



Integrative Massage of Boulder

Rebecca Wilson - Nationally Certified Massage Therapist
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FINANCIAL AGREEMENT

Please read this agreement carefully. We will be happy to answer any questions you have.

I, _____ (client), understand that my insurance is an agreement between the insurance company and myself.

I understand that Integrative Massage of Boulder, LLC will assist me in billing my insurance carrier. However I am fully responsible for any payments due that are denied by my insurance company.

I assign payments to be made on my behalf to this provider for any services furnished to me. I authorize any holder of information about me to release such information needed to determine these benefits or to assist in the collection of payment for services.

If the bills for services are not paid within sixty (60) days by my insurance carrier, I am responsible for the balance on the sixty-first (61st) day.

In the event my insurance company does not pay in full for services provide, I hereby authorize the health care provider to charge all past due payments to my credit card listed below, including an additional 3% transaction fee. If this card is invalid or we are unable to bill this card for any reason, I agree to pay all past due payments within 14 days of the dated bill.

In the event fees are not paid as requested, a collection agency may be utilized, and possibly legal action may follow. If so, I will be responsible for all reasonable costs associated with the collection of such fees, including attorney and court costs.

I further understand that Integrative Massage of Boulder, LLC has a 24-hour cancellation policy and has the right to bill me \$50 for any cancellation outside of that time frame. Unless other payment methods are arranged, I authorize Integrative Massage of Boulder, LLC to charge my credit card \$50 for the missed session plus an additional 3% transaction fee.

I have read and understand this financial agreement

Signature: _____ Date: _____

Credit Card Number: _____ Exp. Date: _____ CVV: _____

Name of Cardholder (as it appears on the Credit Card): _____

Integrative Massage of Boulder...Enhancing inherent wellness through integrative massage.