

Stephanie Kincade, Yoga and Ayurveda Specialist

Policies and Waiver

Financial Policies

1. Services are to be paid for in full at the completion of each visit.
2. If appointments are missed without 24 hr notice, you will be charged an additional fee of \$25 at your next visit.

I have read and understood the financial policies outlined above

Client Signature _____ Date _____

I understand that I am ultimately responsible for implementing positive change in my life, that the purpose of my consultation is to become educated and work with my practitioner to find lifestyle changes and practices that will work for me. These practices may include meditation, yoga, dietary adjustments and other daily routines. Periodic follow-up sessions will be recommended to monitor and support my progress. In this way I can integrate lifestyle changes over time and we can make any adjustments needed in my program.

I understand that neither Yoga nor Ayurveda will provide instantaneous results, although I may see many immediate benefits. Ayurveda is not a passive form of therapy but rather asks each individual to take responsibility for his or her own daily living. I also understand that my practitioner in no way replaces a primary healthcare giver for major ailments, but rather will *work to compliment my primary provider(s) in bringing health and balance back into my life.*

Client Signature _____

Yoga and Ayurvedic Specialist Signature _____

Date _____