

## FINANCIAL AGREEMENT & CANCELLATION POLICY

### Payment and Fee Information:

1. Counseling services will be provided at the standard hourly rate based on session type:

Adult Individuals: \$180                       Children and Teens: \$150                       \_\_\_\_\_  
 Couple or Family Therapy: \$180                       Clinical Consultations: \$150

2. Payment is expected at the time of service or pre-paid via Cash, Check, Credit Card or HSA.  
3. I do not take insurance or bill clients. I can provide a paid invoice for your records.  
4. Reduced fee sessions, when available, are for on-going, bi-weekly appointments.  
5. If checks are returned due to insufficient funds, a \$35 fee will be charged to you.  
6. Celeste Labadie, sole proprietor and Collective Connection, LLC will not be held responsible for any overdraft charges or fees that result from payment being collected.  
7. I require your credit card information on file with either Square Reader or included here:

Card # \_\_\_\_\_ Exp. \_\_\_\_\_ 3-digit code \_\_\_\_\_

Name on card: \_\_\_\_\_ Billing zip code \_\_\_\_\_

8. By providing your credit card information and signing below, you are authorizing me to run your payment for sessions or when fees are expected due to late cancellation.

### Cancellation Policy:

9. You may cancel and reschedule your appointment anytime, as long as you provide at least 48 hours notice by calling and leaving a voicemail on 303-882-3301 or speaking directly to Celeste Labadie via phone. You can also cancel appointments via the client portal (VCita).  
10. Keep in mind, cancellations via email or text message are not a reliable means to communicate time-sensitive information and may result in you being charged a late cancellation fee or no-show fee if the message is not received before your appointment time.  
11. If you cancel an appointment with less than 48 hours notice, you will be charged the full session fee of \$180. Please plan accordingly if you believe you may need to miss an appointment.  
12. Failure to contact me or **cancelling within 2-hours** of your scheduled appointment will result in being charged the full session fee based on the length we had agreed upon. For any no-show appointments, you will be charged the full rate of the session.  
13. Emergencies, illnesses and extreme snow or other inclement weather advisories are the only exceptions to the above cancellation criteria and are assessed on a case-by-case basis.  
14. Be aware, it is customary for there to be a rate increase on a yearly basis. I will provide at least one month notice of any rate increases and notify you of this new rate so that we can plan accordingly and discuss.

By checking this box, I agree, understand and fully consent to abide by this financial agreement.

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Print Client Name

Client Signature

Date

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Print Spouse Name (if applicable, Guardian Name)

Signature

Date