Payment Policy Updates

* We cannot accept credit card payments over the telephone that exceeds **$250.00.** Payments will only be collected ***after*** your treatment so you are billed correctly for the treatments that you received. If we are not billing your insurance company, full payment is required the ***day of*** your treatment for all clinic and spa treatments. For surgeries, we require payment in full at *LEAST TWO WEEKS prior to your surgery date.*

* If a client's balance remains outstanding and is referred to collections, such account will be charged an additional collection fee of 30% and may be subject to additional fees, should litigation be required.

* Patients with unpaid delinquent account(s), which have been written to bad debt or collection, may be denied treatment if not deemed medically necessary.

Deposit, Charges, and Cancellation Policy Updates

- If for any reason you are unable to attend your scheduled appointment, please keep in mind that our office policy states that we charge **$50.00 if cancellation occurs less than 24 hours in advance or you do not show up** for your appointment.

- Unfortunately, if you arrive more than 15 minutes late we cannot guarantee treatment.

- We require a ***$100 non- refundable deposit*** to schedule an appointment that is one hour or longer.

- For surgery appointments, we require a ***$500 non- refundable deposit*** to schedule your appointment which will be applied to your surgery. There is a 1 week prior cancellation policy for surgeries. If your surgery is cancelled more than one week in advance, you can apply the $250 deposit to any other treatment or product. If your surgery is cancelled less than one week prior, the $250 deposit will be used to cover the cost of supplies and staffing. Unused surgical deposits are no longer valid after 365 days.

I also understand and agree that Ritacca Cosmetic Surgery and Medspa is not responsible for the accuracy or interpretation of any medical information received from another physician, practice or lab

Patient Signature _____ **Date**_____