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CANCELLATION POLICY

Effective January 10, 2010

Appointments that are cancelled and rescheduled by phone 24 hours prior to the appointment will incur no additional charges. Cancellations made the same day will incur a full charge as I am not able to replace the appointment. Cancellations the night before for an early morning appointment or same day cancellations will incur a half price charge for the scheduled length of the appointment, even if the appointment is rescheduled. If you reschedule right away, I will be less likely to charge for missing an appointment time. I am not an ogre!!

For swim lesson and children's lessons, you are paying for the time slot. If your child does not cooperate (won't get into the pool, gets cold in 15 minutes, poor behavior, etc) you will still pay for the lesson time, not the lesson time taught. Others are waiting for lesson slots! You are paying for the scheduled session.

Please call 215-272-6774 at any time with any changes to the schedule. Sending an email is not adequate as I may not receive the email until after the appointment time. Please realize that I am not in front of my computer all day. You must call to cancel or reschedule the appointment in order to avoid being charged for the session.

Missing your appointment (aka. no show) will incur full charge for the appointment plus an additional 10% fee for my driving time, if applicable. Forgetting to 'write the appointment in your calendar' is not a valid excuse for missing an appointment. I will try my best to confirm appointments, but since most are scheduled within 2 weeks time, a reminder seems unnecessary. Emergency situations will not be included in this policy.

Thank you for your understanding and cooperation. I look forward to working with all of you to help you reach your goals nutritionally and in the pool.

Founder, President
 Nutrition in Motion

I have read and agree to this policy. I agree to pay any charges resulting if I do cancel within the parameters of this agreement. If you do not feel comfortable with providing PayPal info, please check here and sign the document agreeing that you will pay for the missed appointment by either cash or check.

 Name

 Signature

 PayPal account (email address used for account/billing)

 email to use for communication if diff than PP

 Address

 Date