

Payment Policy

Payment in full is expected when services are rendered, unless prior arrangements have been made. Payment in the form of cash, check, or credit card is acceptable. Checks are to be made payable to Biodynamic Therapies, LLC.

Biodynamic Therapies, LLC., is privately operated and is not affiliated with any insurance companies. All services are provided on a fee for service basis. A statement will be provided following each session for your records and/or for submission for tax deductions for out-of-pocket health expenses.

I have read this policy and understand my responsibility to pay in full for treatment at the time of service.

Patient Name______

Date_____

Signature_____