LES COURS
HYPERBARIC CENTRE

CANCELLATION POLICY
CONSENT TO TREATMENT

We request a minimum of 24 hours advance notice for the cancellation or rescheduling of any appointment. Failure to do so will result in a FULL FEE CHARGE.
I release and give up any and all rights that I may have against you.

I CERTIFY THAT I HAVE READ AND FULLY UNDERSTOOD THE INFORMATION.
I FEEL THAT I HAVE BEEN ADEQUATELY INFORMED REGARDING THE RISKS AND POSSIBLE BENEFITS OF TREATMENT. **I ACKNOWLEDGE THAT NO GUARANTEES HAVE BEEN MADE TO ME CONCERNING THE RESULTS OF THE BELOW STATED PROCEDURES.**

I HEREBY GIVE MY CONSENT TO LES COURS HYPERBARIC CENTER AND ITS STAFF TO PERFORM THE ABOVE MENTIONED TREATMENTS.

Area(s) treated

1) Price per session + tax $

2) Price per session + tax $

3) Price per session + tax $

4) Price per session + tax $

5) Price per session + tax $

6) Price per session + tax $

Printed name

Patient signature

Date

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Suite 111
Montreal QC
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514-845-1234