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**Gentry Therapy LLC**

## **APPOINTMENT CANCELLATION POLICY**

You can cancel or reschedule an appointment anytime, *as long as you provide 24 hours notice*. If proper notice is not received, you will be charged the full fee for the appointment time you reserved.

Please call me at 480-269-1727 by **noon (12:00 p.m.) on the *business day* prior to your scheduled appointment** to notify me of any changes or cancellations. To cancel a Monday appointment, please call me by **noon (12:00 p.m.)** on the preceding Friday.

I am committed to providing you with exceptional care. When you make an appointment with me you are asking me to reserve my time for your care. In exchange, you are agreeing to pay my fee for the time I have set aside for you. When you cancel without adequate notice, it interferes with the functioning of my practice in that I cannot effectively offer that time to another client, and you may prevent someone else from being seen.

We both understand that illness, last-minute emergencies, and other conflicts may come up which may be unavoidable or just more important than making your therapy appointment. If such situations arise within 24 hours of your scheduled appointment, you simply attend to the illness, conflict, or emergency and pay the cancellation fee. Remember that you are purchasing the time I have reserved in my schedule for you, and you can use that time as you choose, either for therapy or attending to the illness, conflict, or emergency. My policy gives you the burden of choosing how to spend the reserved appointment time, and it relieves me from fielding excuses.

Nothing in the foregoing policy should prevent you from calling me in advance to see if I have time in my schedule to accommodate a change. I am very flexible when my schedule allows.

So, in order to move forward, I need from you, not just your consent but also your enthusiastic agreement and promise, that if the day comes that you miss an appointment, for any reason, you will gladly pay for the missed appointment, just like you pay for the sessions you attend. Do I have your agreement and promise?

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Printed name

Signature

Date