

Name:	
D.O.B:	

Terms and conditions - please read

- 1. The cost for your initial consultation is £80 (£40 to pay today due to £40 deposit taken at time of booking).
- 2. All NovoTHOR Treatment sessions with less than 24 hrs notice of cancellation will incur a 50% cancellation fee. This will be added to your next treatment for Pay As You Go (PAYG) clients or deducted from your block booking payment. Sorry no exceptions. If the cancellation is by email or phone message these are time stamped when they are left. *Please note: This clause is currently being waived due to COVID-19 implications.*
- 3. Late arrivals (depending on availability) it may be possible to re-book you later in the same day. If there is anyone after you who have booked in they will be given priority. If you are running late then always ring ahead, it may be possible to swap with another client who is due later than you if they have arrived early.
- 4. **DNA** did not attend. This will incur the full fee for clients regardless of whether they are pre-paid or PAYG.
- 5. For safety reasons, if you wish any of your prepaid treatment sessions to be transferred to another person, this can only be done if that person has been through their own initial consultation at our PBM Therapy Clinic.
- 6. Pre-booked and pre-paid treatment sessions must be used up within 12 months of the first treatment for that block of treatments. In certain specific circumstances this can be extended. For example:
 - State medical emergencies e.g. COVID-19
 - You discover you have cancer, are pregnant or that you want to try to get pregnant.
- 7. The initial consultation fee which includes your first NovoTHOR Photobiomodulation Therapy session (if appropriate) is non-refundable.
- 8. In the unlikely event that you want a refund for unused prepaid sessions the amount refunded will be calculated based on the program you purchased together with the number of sessions remaining.

(Flease Friivi your name	nere)
	can confirm I have read the above d I can have a copy for my records if I need one, and agree to go R treatment programme.
Signed:	Date: