



Leading
By Example

I, _____, understand that I am responsible for any copays or out of pocket costs that are not covered by my insurance and that Leading by Example LLC only accepts credit card payments. I also understand I will be charged Leading by Example LLC's current "no show" fee if I do not show up to my scheduled appointment.

I understand that Leading By Example will request for credit card information, which will be maintained securely and used exclusively for charges as described above. I understand that I can request invoices and receipts for all charges.

Client/Guardian Signature

Date