[](http://bellevuelasercenter.com/)

COSMETIC/SURGICAL PROCEDURE CANCELLATION POLICY

I have been informed and understand that for every cosmetic/surgical procedure that is booked for 30 minutes or longer, I must give a **minimum of 24 hours** advance notice to cancel the appointment. If I notify Bellevue Laser & Cosmetic Center less than 24 hours in advance to cancel my appointment or fail to show up for my appointment, I am aware that I may be charged **50% of the procedure price** for missing the appointment. This fee is at the discretion of the provider.

The **minimum** fee for late cancelled/no show cosmetic appointments are as follows:

Cosmetic Consultation: $150.00

Chemical Peels: $150.00

Botox: $150.00

Dermal Fillers: $350.00

Laser (IPL, IPH, PICO, VBeam, BBL, Halo) $150.00

The minimum fee for late cancelled/no show surgical appointments will be calculated based on the size/location of the scheduled excision.

For all **CO2 procedures**, **Precision TX procedures** and **any** service scheduled for 60 minutes or longer with **any** provider, I must provide **a minimum of one week** advance notice to cancel the appointment. Otherwise, I may be charged **50% of the procedure price**.

I understand that delinquent accounts will be referred to a collection agency. If it becomes necessary to send my account to a collection agency, I agree to pay for all costs and expenses, including reasonable attorney fees.

My signature serves as acknowledgement that I have reviewed this *Cosmetic Procedure Cancellation Policy* and that I have received a copy for my records.

Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_