



1565 East 3300 South
Salt Lake City, UT 84106
385-313-0990

utahinfertilityresourcecenter.org

Professional Service Agreement

Our goal is to provide you with the best service possible. UIRC therapists will use a variety of evidence based treatment methods to provide relief, and to improve coping and problem solving skills.

FEES AND BILLING

Therapy sessions are 45-50 minutes each. Each therapy session is billed at \$100.00, unless you qualify for sliding fee scale sessions. If you fail to arrive to the appointment on time, the session will still end at the allotted time and will be billed as a complete session. Payment is due in full at the end of each session by cash, check, debit card or credit card. We request that UIRC clients do not carry a balance. If you are unable to cover the cost of your session, you may not be permitted to schedule a follow-up appointment.

COLLECTIONS

All delinquent accounts will be charged an interest rate of 1.5% per month (18% per annum). In the event any balance is not paid as agreed, the undersigned agrees to pay collection fees. The undersigned further agrees to pay court costs and reasonable attorney's fees in addition to the collection fee. You authorize us to call you at any number you provide or at any number at which we reasonably believe we can contact you, including calls to mobile, cellular, or similar devices for any lawful purpose. You agree to any fee(s) or charge(s) that you may incur for incoming calls from us, and /or outgoing calls to us, to or from any such number, without reimbursement from us.

CANCELLATION POLICY

If you are unable to make your scheduled appointment, we request that you cancel at least 24 hours in advance so that another client may be scheduled at that time. If 24 hour notice is not given, you will be charged a late cancellation service fee of \$30.00. If you fail to inform UIRC at all and do not show for your appointment, you will be charged the full session amount. This is either \$100 or the sliding fee scale amount agreed upon. Thank you for your consideration regarding this matter.

IN CASE OF EMERGENCY

In the event of an emotional, behavioral crisis call the University of Utah Neuropsychiatric Institute at **801-587-3000**, call **911** or go to the nearest emergency room.

PLEASE BE ADVISED THAT UIRC DOES NOT PROVIDE 24 HOUR CRISIS SERVICES.

I have read, understand and agree to the information and policies as stated above, and I give consent for treatment with UIRC.

Client's Signature

Date

Client's Name Printed