

## Couples Intensive Fee Agreement

The Couples Intensive fee schedule is as follows:

- **Half day** Assessment only Intensive (3 hours), including Couples Checkup Questionnaire: \$775.00
- **Full day** Couples Intensive (6 hours), Relationship Toolkit and Couples Checkup Questionnaire: \$1,550.00
- **Premarital** Couples Intensive (6 hours), including Couples Checkup Questionnaire: \$1,475.00

A deposit of \$500.00 is due at the time of booking with the remaining balance charged 2 weeks (14 days) prior to session. Sessions cancelled less than 14 days in advance are subject to a non-refundable fee of \$500.00.

A Couples Intensive session can be rescheduled **1 time only** up to 14 days prior to the scheduled session, provided that the rescheduled Intensive date is within 3 months of the initially scheduled Couples Intensive.

A full day Couples Intensive begins at 9:00 am and ends at 4:15 pm. There is a lunch break (on your own) from 12:00 pm – 1:15 pm. The second part of the Intensive begins at 1:15pm and ends at 4:15pm.

Financial Agreements:

1. I have agreed to the above stated session rates including the non-refundable deposit of \$500.00 if cancelled less than 14 days prior to the scheduled Intensive.
2. Payment is required prior to the scheduled services. If payment is not received before or at the time of service, I understand that no further sessions can be scheduled or honored until payment is made in full.
3. If the session extends beyond the allotted time, I will be billed for the additional time at the rate of 165.00 per 50 minutes.
4. Handwritten receipts will be provided only if expressly requested during the time of the session. Receipts will not be provided retroactively. Superbills will not be provided by the practitioner nor her staff.
5. Payment options include HSA/FSA, Credit/Debit Card (MC, Visa, Amex).

Credit Card Information: In order for the counselor to collect cancellation and no-show fees as appropriate, credit card information will be recorded below. I authorize Alexis Honeycutt, LLC to charge this credit card for sessions, phone call fees, and cancellation fees (see above) as appropriate. This credit/debit card will also be used for all fees that have not been paid within 30 days. I understand that I may revoke this agreement for future services by providing a request in writing.

Name on Card \_\_\_\_\_

Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_ Billing Zip Code \_\_\_\_\_ Security Code \_\_\_\_\_

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