

By signing this document you agree to informed consent of your treatments as delivered here at Myokinetic by Maggie Van Luven RMT. Collection of your personal information is limited and protected under Federal Legislation. Your information will only be used to collect health data and to develop an appropriate treatment plan. Your information will never be rented, traded or distributed.

**In addition:**

- All appointments that are cancelled without 24 hours notice will be charged the full rate.
- All cheques or credit debits returned by your institution will require a fee replacement in the form of a certified cheque, cash or credit payment. The additional fee levied for such returns is \$45.00
- You agree to allow your massage therapist, Maggie Van Luven to discuss your case with other staff members as the need arises. This type of open dialogue presents an opportunity for us to better serve you through complimentary treatment planning.

Signed in \_\_\_\_\_, on \_\_\_\_\_ of \_\_\_\_\_ 20\_\_\_\_\_

Name \_\_\_\_\_

Signature \_\_\_\_\_