

**Tara Hodgens, LMFT**  
***Licensed Marriage and Family Therapist***  
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*MFC 43981*

*Individual, Group  
Couple & Family Therapy*

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**Cancelled/Missed Appointments**

A scheduled appointment means that time is reserved only for you. If an appointment is missed or cancelled with less than twenty-four-hours notice, you will be billed directly according to the scheduled fee or according to the rules of your health plan. Your health plan does not cover payment for missed appointments; therefore, you are responsible for payment in full.

**Agreement and Consent for Treatment:** I consent to treatment, and services rendered by Tara Hodgens, LMFT. I understand that while the course of therapy is designed to be helpful, it may at times be difficult and uncomfortable.

I have read and understood the above policy.

\_\_\_\_\_  
Patient Name (Printed)

\_\_\_\_\_  
Patient Name (Printed)

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date