



PT/OT/Wellness Commitment Agreement

I, _____, understand that my attendance, engagement and effort directly influence the effectiveness of my treatment. I commit to attending all scheduled physical therapy sessions promptly and on time for best outcome and results for myself. I commit to learning about my condition, treatment options, and strategies for self-management to support long-term health and well-being. If my commitment waivers, I will communicate it promptly with my therapist or instructor, so as not to disrupt my ongoing progress.

I understand that it is my responsibility to communicate any schedule needs, concerns, or changes to Synapse staff as soon as possible. I commit to the following cancellation/no show policy:

For skilled therapies:

- Please notify us of the cancellation at least 48 hours (based on business days) prior to your appointment time to avoid the **\$50 late cancellation fee**.
- Failure to call or show for an appointment will result in a **\$75 No Show fee**.
- Arriving for an appointment >10 minutes late may result in a **\$25 Late fee**.
- Cancelling a HOME VISIT <2 hours prior to appointment will result in **the full cost of your appointment**.

For wellness services:

- Please notify us of the cancellation at least 48 hours (based on business days) prior to your appointment time to avoid the **\$50 late cancellation fee**. If the cancellation is less than 24 hours (based on business days) of your scheduled appointment time, you will be responsible for the **full cost of your appointment**.
- Failure to call or show for an appointment will result in **the full cost of your appointment**.

By signing below, I affirm that I have read, understood, and agree to abide by the commitments outlined in this agreement. I acknowledge that adherence to these commitments will enhance the effectiveness of therapy and wellness services. I understand that failure to show commitment to my therapy journey (**>2 appointments canceled or no showed**) may result in discharge from services.

Patient Signature: _____ Date: _____