



THE  
PARKINSON'S  
FITNESS  
PROJECT

NEUROFITNESS TRAINING / PHYSICAL THERAPY

Return completed forms to:  
106 Lakeside Ave  
Seattle, WA 98122  
[admin@theparkinsonsfitnessproject.com](mailto:admin@theparkinsonsfitnessproject.com)

### Consent To Treat

Name: \_\_\_\_\_.

By signing this form, I authorize The Parkinson's Fitness Project, PLLC to provide evaluation and treatment procedures that are deemed necessary and proper in the treatment of my condition.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

### Responsibility for Payment

I understand billing my insurance is a courtesy provided to me by The Parkinson's Fitness Project, and that I am financially responsible for the remaining payment of my bill for the services provided. Co-payments are due at the time of service. I agree that The Parkinson's Fitness Project may give my insurance company, and other authorized parties, the necessary information to process claim on my behalf in a timely fashion. I authorize payment of medical benefits to The Parkinson's Fitness Project. I acknowledge that it is my responsibility to provide The Parkinson's Fitness Project with current insurance information and to familiarize myself with my insurance plan and its policies.

### Cancellation/No Show Policy

I agree to provide at least 24 hours notice when I need to cancel or reschedule an appointment, and the cancellation of less than 24 hours or not showing up for an appointment will likely result in a cancel/no show charge of \$50.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

### Access To and Release of Health Information

I acknowledge that I have received The Parkinson's Fitness Project's Notice of Privacy Practices and that it outlines how my health information will be used and disclosed and how I may gain access to and control my health information

### Communication

What is your preferred method of communication for appointment reminders, visit follow up, etc.? (Please check)

Phone Call \_\_\_\_\_ Text Message \_\_\_\_\_ Email \_\_\_\_\_.



