



FOCUS THERAPY SERVICES, INC.



Mailing Address
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Main Office
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New Bern, NC 28560
T# (252)672-8676

Bayboro Office
14180 NC Hwy 55
Bayboro, NC 28515
T# (252)745-5500

Morehead City Office
5242 US Hwy 70 W
Morehead City, NC 28557
T# (252)222-3343

www.focustherapy.org

Attendance Policy

Focus Therapy Services, Inc., is dedicated to helping your child reach their goals through the therapy services we provide, however, progress toward goals can only be made with your help! Attendance plays a very important role in therapy progress. Your child's success will depend on prompt and consistent attendance in therapy. The following are our expectations:

1. Make sure that you attend your scheduled therapy appointments.
2. Arrive on time to your therapy sessions. **Parents or guardians must remain in the waiting room with their children until the therapist begins treatment. If you leave the building while your child is in their therapy session, you must supply us with a cell phone number and/or the location where you can be reached.**
3. Your session will include time to discuss the therapy session itself. Home programming is very important! Please be available for discussion the last **five** minutes of your child's therapy session.
4. If you will not be on time for a scheduled appointment, please **contact your therapist or the front office** to see if he or she can still see you. If you arrive late for your appointment, the length of your appointment may be shortened due to the therapist's schedule.
5. If you will be unable to attend a scheduled appointment, please notify the front office at least 24 hours prior to your appointment, or as soon as possible.
6. If you miss a scheduled appointment and there was no prior notification that you would be absent, this will be considered a "broken appointment". If **2 out of 5 appointments** have been canceled or "broken" your therapist may need to offer you a different time depending on his or her schedule.
7. **Please do not** bring your child to therapy sessions if your child:
 - Is in the contagious stage of a communicable disease, such as chicken pox or whooping cough
 - Has uncontrollable diarrhea or vomiting
 - Has a fever greater than 101 degrees
 - Has been diagnosed with strep throat or pinkeye (until 24 hours after treatment has started)
 - Has an untreated infestation of head lice or scabies.

By signing this document, I agree that I have read and I understand the above attendance policies.

Signature of Guardian

Date