

## Serenity Rejuvenation Center (SRC) POLICIES

### Vouchers:

If you purchased a voucher please be advised that we will accept only one voucher per person without exception.

### Return Policy:

No refunds are made for products, service packages and pre-paid treatments once they are purchased. If for some reason you are not able to use an un-rendered, pre-paid service, you may do a one-time exchange of the unused portion toward other services.

### Cancellation Policy:

It is our office policy that we require 48 hours' notice for any cancellations and or rescheduling. **There will be an automatic forfeiture of treatment from your package for each area that you were scheduled for without the appropriate 48 hours' notice regardless of the reason.** We apologize for any inconvenience and hope you understand that without adequate notice we cannot offer the missed appointment time to another patient in need.

### Continuity of Care:

We understand and encourage continuity of care. We do our best to keep you with the same technician or provider for each treatment, however, we cannot guarantee it, and this will not be justification for rescheduling of appointments.

### Social Media:

I consent that SRC may use before and after photographs or videos of me, on our website and/ or social media tools which includes but is not limited to their Facebook/Instagram page. I understand that these images and/or videos will not be used for any other commercial purposes, and will not include patient name. We will ask your further permission if we are to use any facial images that may identify you.

### Compliance:

Thank you for choosing SRC for your aesthetic and wellness needs. It was a pleasure having you today and we hope that you are happy with our services. Our practice appreciates feedback, reviews, and referrals. As a patient/client of SRC, I agree that if I leave a review in any forum at any point in time, that I consent that SRC staff has my approval to respond in the context of that review or commentary.

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

(Signature of Parent or Legal Guardian if under 18 Years)

Date: \_\_\_\_\_

Serenity Rejuvenation Staff: \_\_\_\_\_

Date: \_\_\_\_\_

Thank you for understanding!  
SRC TEAM

**We accept gratuity and it goes directly to our employees!**