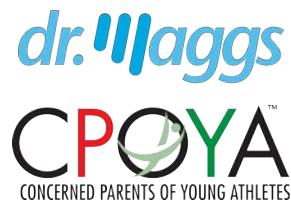


Dr. Tim Maggs
1462 Erie Blvd.
Schenectady, New York 12305
518.393.6566 p 518.393.2616 f



Per Visit Program

* This is for the athlete who only wants a specific number of treatments. Appointments must be made by calling our office and choosing the date of services interested in. No specific time is needed. **Cost: \$25.00 per visit**

* If this patient also requests custom orthotics, there is an additional charge of \$330.00 per pair.

Yearly Program

* This is for the athlete who wishes to receive one treatment per week throughout the entire school year. This cost will be much less per visit than the "Per Visit" Program. Throughout the 10 month school year, there will only be a charge for 8 months, at \$80.00 per month.

Cost: \$640.00/year, or \$64.00/mo. through May 2023 * Second or third child—there will be no additional cost after the first family member being treated.

Custom orthotics (10 monthly payments from start date)

1 pair - \$330.00 or \$33.00/mo.

2 pairs - \$660.00 or \$66.00/mo.

_____ Pair(s)

3 pairs - \$990.00 or \$99.00/mo.

4 pairs - \$1,320.00 or \$132.00/mo.

The Stick

* \$40.00 - \$4.00/mo. _____ # of Sticks

Date: ____/____/____ **Treatment Start Date:** ____/____/____

Patient Name(s): _____ Patient's Cell#: _____

Parent Name: _____ Cell#: _____

Parent's E-Mail Address: _____

Date(s) of Birth: _____

Credit Card: _____ Expiration Date: _____

CVV: _____ Name on Card: _____

Billing Address: _____ Billing Zip Code: _____

Total Cost: _____ Monthly Cost: _____

Signature: _____

FAX FORM TO 518.393.2616

Note: Your credit card will be charged a prorated fee for any partial month prior to first full month. There will occasionally be a Tuesday where Dr. Maggs will NOT be at the school. Our office will e-mail as soon as we know of the cancellation. If your son is not treated on a given week, he is welcome to come in to our office in Schenectady for treatment that week.*