



**GENERAL PRACTITIONERS**

Dr Jonathan Aitken BMBS (Notts), MRNZCGP, MSc Hons (Cant)  
Dr Danielle Brown MBChB, Dip Obst, Dip Paeds, FRNZCGP  
Dr Johanna Joblin BM(Soton), MRNZCGP, BE(Hons)(Elec)  
Dr Philip Jacobs MBChB Dip Obs FRNZCGP Dip Palliative Med  
Dr Sarah Marr MBChB (Edin) MRCP(UK) FRNZCGP  
Dr Paul O'Gorman MBChB Dip Obs FRNZCGP Dip Child Health

## Terms of Trade

- Payment in full is due on the day of your consultation unless you have set up an automatic payment.
- You are welcome to pay on the day of consultation via internet banking to 03-0767-0333775-000 stating your name and chart number as the reference.
- An automatic payment or direct debit arrangement is a good way of managing the costs of your healthcare. If you have set up this type of payment arrangement, and wish to cancel it, please let us know beforehand.
- If there is a failure to pay fees, and after we have taken steps with you to manage your debt without success, we will involve a debt collection agency. Any fees incurred in debt recovery will be passed on to the account holder.
- If you have any concerns about managing the costs of your healthcare please talk to our accounts manager about options for you.
- If you do not attend for a booked appointment, and you have not contacted us to cancel the appointment, we reserve the right to charge a non-attendance fee of \$20.00.
- All casual and non-resident fees are payable **PRIOR** to the consultation or service being provided.
- All vaccines which are not part of the New Zealand Immunisation Schedule, eg travel vaccines, are to be paid for **BEFORE** they are given.

**I have read and agree to these terms of trade:**

**Patient's Name:** \_\_\_\_\_

**Signed by patient:** \_\_\_\_\_

**Signed on patient's behalf:** \_\_\_\_\_ **Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_

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[www.halswellhealth.co.nz](http://www.halswellhealth.co.nz)