



SCHEDULING

Please contact the office to schedule an appointment: Gold Coast (312) 981-1291 or Roscoe Village (312) 778-5070. If we are away from the desk, please leave your name, phone number, and a brief message and we will return the call as soon as possible. You may also submit an inquiry online through our website www.naturalbeautymedspa.com. At this time, we are not able to accommodate appointment requests made through social media DMs.

WAITLIST:

We appreciate all of our patients and recognize that it can be difficult to schedule an appointment on short notice. If you would like to be seen sooner than your scheduled appointment, please ask to be added to the waitlist. Patients on these lists are given first priority and are contacted as openings become available.

15-MINUTE GRACE PERIOD:

Please be on time to your scheduled appointment. Your appointment will be automatically cancelled after a 15-minute grace period and you will be charged \$75 cancellation/no-show fee.

MISSED APPOINTMENT AND CANCELLATION POLICY:

If you are unable to attend your scheduled appointment, please contact the office to reschedule and/or cancel: Gold Coast (312) 981-1290 or Roscoe Village (312) 778-5070. Our office requires 24 hours' notice in order to offer openings to waitlisted patients. If you do not provide proper notice, you will be charged the \$75 Cancellation/No-Show fee. Cancellation fees are strictly enforced and are non-refundable.

ACCEPTED METHODS OF PAYMENT:

Wiesman Cosmetic Surgery, Injections by Ashley, and Natural Beauty Med Spa accept cash, personal/cashier's checks, Care Credit, and all major credit cards (Visa, Amex, Mastercard, and Discover) as methods of payment. We do not provide change for cash transactions, but can leave any overpayments as a credit on a patient's account for future use.

We also accept third-party financing through Care Credit. To apply for a Care Credit card, please visit www.carecredit.com. Please note that we accept payments made by the primary account holder only, not authorized users. Patients remitting payment with a Care Credit card must also present two forms of ID and provide original signatures on all receipts. Further restrictions apply; please inquire within

DEARBORN STREET

(312) 981-1291

710 N Dearborn St Level 2,
Chicago, IL 60654

ROSCOE STREET

(312) 778-5070

2152 W Roscoe St,
Chicago, IL 60618