

Balboa Horizons

Financial Contract

Costs of Treatment

By signing this contract as the responsible party for treatment fees. I further understand that all fees paid are non-refundable regardless of length of stay.

All fees are non-negotiable and due and payable at time of admission.

Deposits payments are non-refundable & non-transferable.

No verbal agreement will supersede this contract.

I hereby agree to hold Balboa Horizons harmless for any and all future claims resulting from this contract.

Treatment: 30days 60days 90days

Total amount due \$_____ Date_____

Check #_____ Wire Transfer#_____

Responsible Party:_____

Date:_____

Participant/Client:_____

All checks made payable to:

Balboa Horizons Recovery Center

Call Toll Free: 866-316-4012 Fax: 949-675-3916

