



## Interpretation Services Client Agreement

### Client Information

Company Name:
Contact Person:
Address:
Email:
Phone Number:
Billing Address (if different):
Billing Contact (if different):

### Terms, Conditions, and Charges

Hourly Fees:	\$50 per hour during normal business hours 8am to 6pm Monday through Friday. \$60 per hour outside of business hours. Minimum 1 hour. Time starts upon arrival and check-in at the location and ends when the interpreter leaves the facility. These rates apply to locations within a 20-mile radius of our office at 3620 N High St, Columbus, Ohio 43214 or to virtual appointments. Locations outside this radius may not be served.
Notice of Service:	Services must be requested 3 business days in advance, and a confirmation will be sent within 1 business day confirming availability of an interpreter. Rush requests will be accommodated depending on interpreter availability.
Cancellation Policy:	All cancellations of services contracted by the Client require written notice. If cancelled within 24 hours of the scheduled appointment, the minimum hours or estimated length of time if over 1 hour will be due.
Duration:	Unless otherwise agreed in writing, this Agreement will remain in effect for two years. At the end of the initial two year term, this Pricing Agreement will automatically renew for an additional one year unless and until terminated by either party.

**I, agree to the terms and conditions in this agreement on behalf of the above company/client.**

**Signature:**

**Date:**

**Print Name:**

**Title:**

### Payment Details

Payment Method:	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card
Amount:	
Credit Card Details:	CARD TYPE: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover
Name on Card:	
Card Number:	
CVV:	
Billing Address:	
Expiration Date (MM/YYYY):	
<b>Payment Signature:</b>	<b>Date:</b>