



NO SHOW / CANCELLATION POLICY

Effective Jan 1, 2013

Patient Name:

A No Show fee will be charged to your account if:

- You do not show up for your scheduled appointment or
- You do not cancel your scheduled appointment at least 24 hours prior to your scheduled appointment time.

This includes all established appointments, dental procedures, dental cleanings and cosmetic appointments. The fees are as follows:

- **1st missed appointment:** If an appointment is missed or canceled within the 24 hour window, a letter will be sent to your home reminding you of our policy. We reserve the right to charge you \$50 for each hour appointment time scheduled.
- **2nd missed appointment:** After your second missed appointment, another letter will be sent to your home notifying you, of a \$50 charge to your account. In order for you to make another appointment this charge must be paid.
- **3rd missed appointment:** Will be charged the full appointment fee and or dismissal from our practice.

Our office understands that true emergencies do happen. If this is the case, please provide us with adequate reasons or proof and the missed appointment will be removed from your accounts record.

LATE ARRIVAL: When we reserve time for you, we require all of the scheduled time to provide you with the best quality work possible. When you are late it decreases our ability to accomplish this. Please try to arrive on time so that we are not late for our remaining appointments of the day.

I have read the policy above. I understand and agree to abide by the listed terms.

PATIENT SIGNATURE (of Guarantor if under 18 years of age)