

Dear Parents

Due to the increased number of “last minute” cancellations we must implement a new policy in order to compensate for our non-productive times.

Parents are responsible for the scheduled appointment by understanding that a fee of \$100.00 per child will be applied if the appointments are cancelled or missed without a minimum of 24 hrs notice.

Thank you in advance for your respect and kindness to this important matter.

Signature _____ **Date** _____

Sincerely,

Dr. Yedda Gomes-Ruane