

Cancellation and Saturday Appointments Policy

Dear patient:

When you schedule an appointment with us, we reserve this special time for you to provide you with a necessary treatment.

If you are unable to keep your appointment, please kindly give us **24 business hour** notice, so we can give another patient an opportunity of receiving dental treatment.

Regrettably, we are forced to implement the "late cancellation" and "no show" fees to cover basic operatory set up expenses:

- \$50 */per hour* for **NO Show** or **less than 24 business hour cancellation.**
- Due to high demand for **Saturday appointments**, we ask you for giving us **48 hour notice** if you cannot make it. If you do not show for Saturday appointment, you will be charged \$50 per hour of appointment and you will not be given another Saturday appointment in the future.

I am aware of the cancellation policy, understand its terms and conditions and agree to comply with it

Patient

signature _____ Date _____