



MISSED OR CANCELLED APPOINTMENTS

We ask that you kindly and considerately provide us with at least 24 hours of notice prior to your scheduled appointment time in order to re-schedule.

At Smiles for Life, we value your time and realize how important that time is. When you schedule an appointment with us, that time is reserved specifically for you and the rest of the schedule is altered to accommodate your needs. We try our very hardest to be punctual and to not have you waiting past your scheduled appointment time.

We realize that sometimes emergencies arise. However, if you do not show up to your scheduled appointment or cancel at the last minute that leaves a gap in our schedule which could have been filled by someone needing care. The time of the Dentist, the Hygienist and the Team are very valuable as well and not providing us with adequate notice doesn't allow us the opportunity to care for another patient nor allow us to recover the lost revenue from the missed appointment. Based upon these facts, and at our discretion, your account may be charged a fee between \$25-100 per occurrence.

We thank you for your consideration and appreciate your mutual respect.

Sincerely,

Smiles for Life Team

Patient Name: _____

Patient Signature: _____ Date: _____