

*Advanced*  
**DENTAL CARE**

Dear Patient,

In regards to **appointment policy**;

***Our fees represent the high quality of service and care that you receive here at Advanced Dental Care. We offer excellent dentistry at a competitive cost. In order for us to maintain our affordable fees and high quality of service, we must ask for your cooperation and respect in regards to our appointment policy.***

When you schedule an appointment with our office, **we reserve that time specifically for you because we know your time is valuable.** We provide several reminder notifications before your appointment:

- two weeks prior, you will receive an email or text confirming the date and time,
- two days prior, we will attempt to contact you via phone/text/email to confirm your appointment,
- And if we haven't been able to reach you, we will call again the day prior to your appointment.

**We request at least 48 hours cancellation notice, as we have a long waiting list for appointments.**

- **If you fail to give less than 48 hours cancellation notice, we will request a credit card number upon rescheduling of the original appointment. If a card number is given we will only charge if you fail to give proper notice when/if cancelling the appointment. The charges are explained below;**
- **If we do not receive 48 hours cancellation notice, or you do not show for the visit, the appointment may be considered a "No Show or Fail", and you will be billed an office visit charge of \$50.00 per hour.**
- **If you were scheduled for a more lengthy appointment, additional hours will be billed at \$50 per hour.**

***So, if you must cancel, please make sure you give us a call/text/email at least 48 hours in advance.***

**We appreciate your understanding and respect in this matter.**

\_\_\_\_\_ Print Name

\_\_\_\_\_ Signature

\_\_\_\_\_ Date