

Appointment Policy

We value your time and would like to reserve appointment times that work with your busy schedule. We reserve time exclusively for you!

However, if an unforeseen complication arises with your reserved appointment, please call the office at least 24 hours ahead of your reserved time.

A fee of \$50.00 will be charged to your account if adequate notice is not given.

Thank you for your understanding and cooperation.

Patient Name: _____

Signature: _____ Date: _____