



Acknowledgement of No-Show Policy

Due to the increasing number of patients who do not show up for their scheduled appointments or fail to cancel within a 24-hour period before the appointment, the practice has established the **No-show** policy with a fee of **\$25.00**. Exceptions for emergencies will be considered on an individual basis. We provide appointment cards with your appointment information on them. If the appointment card is misplaced, please call the office to verify the date and time of your appointment.

Please call at least 24 hours prior to your appointment if you need to reschedule. This policy is to ensure we have the most availability for our patients.

Please sign to confirm you have read and understand this policy.

Patient Name

Date of birth

Signature of Patient/Guardian

Date