

Amber Dental Care  
1009 Amber Rd  
Orlando FL 32807

**Insurance / Appointment Policies**

1. We will gladly accept and bill dental insurance as a courtesy to our patients. Please Understand that your dental benefit program is a contract between you, your employer, and your insurance company; we are not a party to that contract. Our office staff "understands" dental insurance and will assist you in obtaining the maximum benefits possible from your plan.

It is important that you understand that any fees for treatment given are at best an estimate and are not a guarantee of payment from your insurance. **Please be aware that any procedures not paid for or covered by your insurance are ultimately the responsibility of the patient.**

(Initials: \_\_\_\_\_)

2. Appointments in our office are very important to both of us. We would like to give you the best service possible, please be punctual. There are times that scheduled procedures may take longer than expected and we ask for your patience and cooperation as we will give our best care and attention to every patient. **Please be advised that patients who are more than 15 minutes late to an appointment or who fail to cancel an appointment 24 hours in advance will be rescheduled and charged a broken appointment fee of \$30.00 per appointment.**

(Initials: \_\_\_\_\_)

3. **Please be advised, there will be a charge of \$25.00 per patient for copies of dental x-ray taken at our office.** X-ray will be ready to be picked up 24 hours from the time they are requested and will only be released to the patient or a person with prior authorization in writing by the patient,

(Initials: \_\_\_\_\_)

I have read and understand the office policies for Amber Dental Care described above.

\_\_\_\_\_  
(Signature of Patient, Parent (if minor))

\_\_\_\_\_  
Date