



## **PATIENT MISSED APPOINTMENT AGREEMENT**

We ask when you schedule an appointment that you make every effort to keep that commitment. We understand that personal emergencies sometimes occur, and we always take that into consideration when receiving a last minute cancellation.

If you find that you cannot keep your scheduled appointment, we ask you to provide a minimum of forty-eight business hours notice to us so we may schedule another patient in need of treatment. For your convenience, our office hours are Mondays, Tuesdays and Thursdays from 8:00 a.m. to 5:00 p.m., and Wednesdays from 7:00 a.m. to 4:00 p.m.

It is our policy that with less than forty-eight business hours notice a failed appointment charge of \$100.00 will be applied to your account. If you have any questions regarding this policy please do not hesitate to contact us. We sincerely appreciate your understanding and cooperation with this matter.

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Patient Signature

\_\_\_\_\_  
Date