

Reflections Dental

APPOINTMENT AGREEMENT

At Reflections Dental, we understand that your time is very valuable. We are constantly striving to make your experience here more pleasant than any other place you have previously been. Trying to accommodate every patient's individual needs and work schedule can be challenging. We make every effort to stay on time so that our patients will not have to wait unnecessarily.

Your appointment is a commitment of time between you and our office. We ask that you make every effort to keep that commitment. We do provide a courtesy reminder call one to two days prior to your appointment.

If you find that you cannot keep your appointment, we do require a minimum notice of 24 hours so we are able to assist other patients with their dental needs. If our office is not notified within the 24 hours, you will be subject to a \$50.00 late cancellation charge.

By signing below, I agree to fulfill my obligation as a patient at Reflections Dental and agree to the "broken appointment" fee should I not give proper notification.

Signature of patient or responsible party

Date