

CHARLES R. WHITE II, DDS

◆ ◆ ◆ FAMILY DENTISTRY ◆ ◆ ◆

APPOINTMENT/PAYMENT POLICY

Welcome to our office! We appreciate your confidence in us and we wish to continue to provide you and your family with quality dental care in a long-term relationship. We know that your time is valuable and ours is as well. In order to schedule our patients with the earliest possible appointment, we have adopted the following policy:

1. A scheduled appointment is time reserved exclusively for you. If the appointment must be changed, we require **AT LEAST 24 HOURS** notice. If this notice is not given, it will be considered a “Failed” appointment.
2. At the first failed appointment, you will be reminded of our policy. We realized people get sick, people can forget, or emergencies arise. As soon as you know you cannot make the appointment, call us—even late at night.
3. After the first appointment, we reserve the right to charge a **failed appointment fee of \$35** for any additional failed appointments. Please note that insurance companies will **not** pay failed appointment fees. **These fees will have to be paid prior to any further appointments being made.**
4. There is a **4% processing fee** for all debit and credit card transactions. We **DO NOT** retain any of these fees. You can avoid these fees by paying with cash or check.

I UNDERSTAND THE APPOINTMENT/PAYMENT POLICIES OF CHARLES WHITE II, D.D.S. AND AGREE TO ABIDE BY THEM. ANY QUESTIONS I HAVE ABOUT THESE POLICIES HAVE BEEN EXPLAINED BY THE OFFICE STAFF.

Patient’s Signature

Date

Witness