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## MISSED APPOINTMENT POLICY

*In order for our office to utilize all the appointment scheduling time, we require and enforce that all cancellations are to be made with a 24hrs advance notice before your reserved appointment time. Each no call no show/failed appointment in your child's chart. On the 3<sup>rd</sup> missed appointment, you will be referred to another practice and will no longer be a patient at Associated Children's Dentistry.*

## LATE ARRIVALS

*Every effort will be made by our office to see that your child is seen at the scheduled appointment time. We expect the same courtesy. If you arrive more than 15 minutes late, you may have to reschedule your child's appointment. We do not want to encroach upon someone else's time or rush your child through.*

*Please ask any question you may have concerning our office policy before signing below. Your signature below states that you fully understand and will abide by the terms stated.*

Patient's Name: \_\_\_\_\_

Parent/Guardian's signature: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTE:** No child under 18 years of age is to be left unattended. Parent or Guardian must be present during the duration of your visit. Or else no treatment will be done. **ALL PAYMENTS ARE DUE AT THE TIME OF SERVICE.**