



103 PLANTERS DIVE | DARLINGTON, SOUTH CAROLINA 29532

Dental Appointment Agreement

Your appointment is at a time that has been set aside exclusively for you with either Dr. Wilson or our hygienist. We want to be available for your needs and the needs of all of our patients. We do not overbook our schedule and make every attempt to see emergency patients as soon as possible. We understand that circumstances do arise and ask *for* 24 hours notice to cancel a confirmed appointment

If you are unable to notify the office and miss an appointment there will be a charge of \$50.00 to reschedule the appointment. (Of course valid emergencies will be understood.)

If you are more than 15 minutes late for your appointment it will be considered a missed appointment. We hope you understand that each patient deserves our scheduled time and their treatment should not be compromised by another patient being tardy. Our goal is for each of you to be comfortable and completely satisfied with our service.

We want to thank you for choosing Aesthetic Dentistry to provide your dental needs. Your health and happiness are our number one concern.

Respectfully,
Dr. Cliff Wilson

Signed _____

Date _____