

SAMUEL I. BARR, D.M.D.
231 Broad St.
Oneida, N.Y. 13421
Phone (315-363-2672)
Fax (315-363-9538
www.barrdental.com

APPOINTMENT NO SHOW POLICY

Each time a patient misses an appointment without providing proper notice, another patient is prevented from receiving care.

We reserve the right to charge for these occurrences.

Due to high patient demand and limited availability of appointments, we have a No Show Fee that requires cancellation with at least 48 hours notice. We do not double book appointments; your appointment time is reserved exclusively for you.

Any appointment that is a No Show will be subject to a \$50.00 No Show Fee. This fee will be billed directly to you, not your insurance company.

By signing below, I acknowledge that I have read and understand this policy.

Patient Name (printed)

Date

Patient Signature

Date