

# Appointment Reminder

If you are unable to make your appointment please let us know at least 24 hours in advance. A \$125 fee may be added for late cancellations or no-shows for appointments.



**Pisgah**  
FAMILY  
DENTISTRY

For: \_\_\_\_\_

With: \_\_\_\_\_

On: ☐ Mon. ☐ Tues. ☐ Wed.

☐ Thurs. ☐ Fri. ☐ Sat.

\_\_\_\_\_ at \_\_\_\_\_ AM/PM