

960 Barrington Pkwy. Marion IA 52302 Telephone: (319) 377-1043

Fax: (319) 377-8180

## **NO SHOW POLICY**

Each time a patient misses an appointment without providing notice, another patient is prevented from receiving care. We reserve the right to charge for these occurrences. We do not double book appointments and your appointment time is reserved exclusively for you. Any appointment that is a No Show will be subject to a <u>\$20</u> No Show Fee. This fee will be billed directly

By signing below, I acknowledge that I have read and understand this policy.	
Patiet Name ( printed )	Date of Birth
Patient or Parent/Guardian Signature	Date