



Our practice is committed to providing the best service and treatment to our patients. The fees reflect our commitment to quality restorative dentistry using the latest technology. This commitment extends to all areas of the office including less frequently seen areas such as continual staff education and precise sterilization techniques. We are also committed to providing you with up-to-date information and educational tools so that you may fully participate in maintaining optimum oral health. Our financial policy is intended to facilitate excellent service to you while minimizing our administrative costs.

**Finances:**

Payment is due at the time services are rendered. We will file your dental insurance for you and collect your estimated portion. We accept cash, checks and most major credit cards. We offer a flexible extended payment plan option with prior credit approval through a third party credit agency.

**Insurance:**

All charges you incur are your responsibility regardless of your insurance coverage. We must emphasize that as your dental care provider, our relationship is with you, our patient, not with your insurance company. If payment from your insurance company is not received within 60 days from the date of service, you will be expected to pay the balance in full.

We perform routine insurance billing procedures upon verification of coverage. However, if your claim is denied, you will be responsible for paying the full amount.

**Cancellation Policy:**

Your appointment times are especially reserved for your child. Should you need to cancel, please give us **48 hours notice to avoid a cancellation fee.** This allows another child needing care to be seen by us.

**Overdue Balances:**

Balances over 60 days are subject to a collection fee.

Our goal is to provide quality care with your convenience and service in mind. Please let us know if you have questions or concerns at any time.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_