

**NEWPORT BEACH CANCELLATION AND NO SHOW POLICY**

**CANCELLATION POLICY**

1. A fee of **\$50.00** is charged for patients who miss or cancel their appointment **without** a 24 hour notice.
2. A fee of **\$100.00** is charged for missed/cancelled without 24 hour notice for **two hour Dr appts** AND/OR surgical procedures and/or IV sedation appointments.

The cancellation fees will be applied to your account and must be paid prior to scheduling any future appointments.

Please be aware and schedule your appointment accordingly.

I am aware of the cancellation/No Show Policy

Signature \_\_\_\_\_ Date \_\_\_\_\_