

# Robert R. Perry Jr., D.M.D. P.C. And Associates

## Office Policy

### Appointment Policy

We respect your time and ask that you respect ours by honoring your appointment commitment. A broken appointment is a loss to everyone. Once you have made an appointment, this time is reserved for you. Please give us at least **24 hours** notice if you are unable to keep your appointment. This will allow us to accommodate the needs of other patients more readily. If we do not receive a cancellation notice **WITHIN 24 HOURS**, a cancellation fee of **\$35.00** may be applied to your account.

### Dental Insurance

If we have been made aware of all your insurance information before your appointment, we will be happy to file your claim for you. We accept most major insurances however; your insurance is a contract between you, your employer and a carrier so you must be aware of your insurance benefits, as we will collect the estimated co-payment on the day the service is rendered. While we are happy to file your claim, please understand that our office files claims as a courtesy to the patient and is not guarantee of payment from your insurance company.

### Patients without Insurance

Patients without insurance are expected to pay for their services on the same day the services are rendered.

### Accepted Forms Of Payment:

We accept cash, checks, most major credit cards and CareCredit®

I have read and understand the office policies of **Robert R. Perry Jr., D.M.D. P.C. and Associates**. All of my questions have been answered by the front desk staff.

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Signature of patient

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Date