

CANCELLED or MISSED APPOINTMENTS/ CITAS CANCELADAS o PERDIDAS

WARNING: If you cancel your appointment on the day of the appointment, it will be considered a **FAILED APPOINTMENT** regardless of the time of your appointment. It is your responsibility to notify us at least 24 hours in advance. Please note that after 3 FAILED APPOINTMENTS (per family) you will be dismissed from our office.

Thank you!

Parent Signature: _____ **Date:** _____

WARNING/ADVERTENCIA: Si cancela su cita el dia de la cita, se va a considerar una **CITA PERDIDA (o FALLA)** sin considerar la hora en la cual tenia su cita ese dia. Es su responsabilidad de avisarnos con 24 horas de anticipacion. Por favor anote que despues de 3 CITAS PERDIDAS (por familia) ya no podremos atenderlos.

Gracias!

Firma del padre: _____ **Fecha:** _____