

Ann T. Kennon D.M.D. PC
63 Prospect Street
Taunton, MA 02780
508-823-1550

Appointment Cancellation Policy

Our policy is as follows:

We require that you give our office **48 hours** notice in the event that you need to reschedule your appointment. This gives us an opportunity to schedule somebody else into that appointment. If you miss an appointment without contacting our office within the required time, this is considered a broken appointment. A fee of **\$50.00** will be charged to you; this fee cannot be billed to your insurance company and will be your direct responsibility.

Additionally, if a patient is more than 20 minutes late without prior notice for a scheduled appointment, we will consider this a missed appointment, and a **\$50.00** cancellation fee will be charged.

If you have any questions regarding this policy, please let our staff know and we will be glad to clarify any questions you have.

We thank you for your patronage.

I have read and understand the Appointment Cancellation Policy of the practice and I agree to be bound by its terms. I also understand and agree that such terms may be amended from time-to-time by the practice.

I, _____ (print name), have received a copy of Dr. Ann Kennon's Appointment Cancellation Policy.

Signature of Patient

Date