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**Peter Gurr, D.D.S.**  
Board Certified Pediatric Dentist

**Dr. Tyrus Hatcher, D.D.S.**  
Board Certified Pediatric Dentist

**Dr. Ayla Idilbi, D.D.S.**  
Board Certified Pediatric Dentist

## Appointment Agreement

We reserve time in our schedule especially for your child. In consideration of others, we kindly request at least 2 business days' notice prior to cancelling or rescheduling any appointments.

We understand that there are circumstances that may prevent you from keeping your child's appointment; however, by providing us with as much notice as possible, we may be able to contact another family who would like that appointment time. Cancelling with less than 2 business days' notice does not allow us enough time to schedule another patient in need of treatment.

Please provide our office with 48-hour notice to change or cancel an appointment. Patients who do not attend a scheduled appointment or do not provide 24-hour notice to change a scheduled appointment may be responsible for a **\$25.00 service charge**. This charge cannot be billed to insurance and must be paid on or before the next scheduled appointment.

After two missed or cancelled appointments without the appropriate 24 hour notice, you may be placed on a same day scheduling policy for your preventative and treatment visits, which would not allow you to schedule any appointments in advance.

Parents/patients that are running late are asked to call the office as soon as possible to check with the front office team to determine if the office will still be able to keep their appointment. In consideration to other patients, your child's appointment may be rescheduled if you are more than 10 minutes late for your scheduled appointment time.

School holidays, as well as before and after school hours are our most popular appointment times. Appointments cancelled less than 1 business day notice that are scheduled on a school holiday, before or after school time will not be rescheduled on another school holiday, before or after school appointment time.

If your child needs treatment with nitrous, we require a \$100 deposit. If your child needs treatment with sedation, we require a \$200 deposit. This deposit is applied towards your balance for treatment. If you cancel your appointment without a 24 notice or "no show" 50% of your deposit is applied to a cancellation fee.

If your child requires treatment with general anesthesia, we require a \$500 deposit. This deposit is applied towards your balance for treatment. If you cancel your appointment without a 24 notice or "no show" 50% of your deposit is applied to a cancellation fee.

We greatly appreciate your cooperation in helping us provide excellent care to your family. Please sign below that you have read and acknowledge the above information provided to you.

Patients Name: \_\_\_\_\_ D.O.B \_\_\_\_\_

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