

PAYMENT / COPAYS / DEDUCTIBLES

Payment for copays and/or deductibles is due at the time services are provided. We have several options for payment of services, which may be paid in following manner:

1. Payment by cash, check, Visa, MasterCard, Discover or American Express
2. Payment by CareCredit. CareCredit is bank financing for qualified applicants who prefer additional time to pay their balances. It is a revolving line of credit through an independent financial institution. It is designed to meet the needs of our patients and is ideal for extended treatment plans, elective procedures, or emergency care and treatment not covered by insurance. CareCredit has financing options available that include 3, 6, and 12 months of interest free financing.

I / We understand the above paragraphs regarding payment for services , and have had the opportunity to have any questions answered to the best of Richard K. Amo D.D.S., Inc.'s ability.

signature of responsible party

ACCOUNT BALANCES / CHARGES

Balances older than 60 days will be subject to an additional billing charge of \$5.00 or interest charges of 1.7% per month until the account is paid in full. If a payment has not been received on the account during the 90 days, account risks being sent to a collection agency and additional fees incurred due to delinquency in payment will also be charged to the patient. We do understand that temporary financial problems may affect timely payment of your account. If this is a concern, we do ask that you contact us promptly for assistance in the management of your account. Any personal check returned unpaid or with non-sufficient funds (NSF) will incur a \$50.00 NSF CHECK FEE and possible other finance charges .

I / We understand the above paragraphs regarding account balances/charges, and have had the opportunity to have any questions answered to the best of Richard K. Amo D.D.S., Inc.'s ability.

signature of responsible party

CANCELLATIONS AND BROKEN APPOINTMENTS

In an effort to keep dental costs down while maintaining a high level of professional care, we respectfully request **24 HOUR CANCELLATION NOTICE**. Your scheduled time has been reserved just for you and the doctor or hygienist. Due to staff overhead that occurs in broken appointment slots, **a cancellation fee is charged if a 24 hour notice is NOT given**. Our message system will accept your cancellation calls for you and will record the time/date of your calls to avoid a charge to your account. We appreciate your efforts to keep scheduled appointments and we make every effort to continue to have convenient hours and prescheduled availability to you.

I / We understand the above paragraphs regarding cancellation fees, and have had the opportunity to have any questions answered to the best of Richard K. Amo D.D.S., Inc.'s ability.

signature of responsible party

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