

# Alamo Asthma & Allergy Associates

Drs. Michael & Adrienne Vaughn

115 Gallery Circle, Ste. 200, San Antonio, Texas 78258

Office (210)-499-0033 / Fax (210) 404-0926

## Office "No Show policy" Guarantee

We understand that emergency situations can arise that may conflict with scheduled appointments however, if this occurs, we expect you to contact us in a timely manner. For non-emergency situations, our office policy requires you to cancel 24hrs prior to your appointment. To re-schedule after a missed appointment, you must return this form agreeing to a \$60.00 cancellation fee for any missed future appointments. ***Appointment times will be made available to you after receipt of this agreement.*** We reserve the right to terminate services to anyone who repeatedly fails to arrive at least 10 minutes prior to scheduled appointments.

***I agree to billing the card provided for a \$60.00 fee for all future missed appointments.***

Name \_\_\_\_\_ Signature: \_\_\_\_\_

Date \_\_\_/\_\_\_/\_\_\_

Card type: \_\_\_ MasterCard/ \_\_\_ Visa/ \_\_\_ Am. Express

Card # \_\_\_\_\_ Security code: \_\_\_\_\_

Expiration: \_\_\_/\_\_\_/\_\_\_