

# Lakeside Cosmetic & Family Dentistry

## Fee and Payment Policy

In an effort to keep dental costs down while maintaining a high level of professional care, we have established the following as our financial policy:

Payment is due at the time of service for all services rendered.

Payment options are: checks, cash, visa, mastercard, discover card or care credit.

Insurance: as a courtesy we will file your insurance claim for you. You will need to be prepared to pay your estimated amount that is determined not payable by your insurance plan, such as deductibles and percentages. (please understand that this is an estimate.)

Return check charge: a \$25 charge will be applied to your account for checks returned unpaid by your bank.

Failed appointment fee: we reserve the right to charge \$50 for appointments cancelled or broken without 24 hours advance notice.

I understand that I am financially responsible for all charges incurred whether or not insurance is involved.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT FULL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_