

WHITE SANDS CHIROPRACTIC CLINIC, INC.
24 BEAL PARKWAY S.W.
FT. WALTON BEACH, FL 32548
Dr. Erik Persinai, D.C.

PH: (850) 226-6728
FAX: (850) 226-6729

MISSED RESERVATION POLICY

By signing I am stating that I understand that I will be charged \$25.00 for failure to notify White Sands Chiropractic Clinic that I will be unable to honor any scheduled appointment(s) time(s).

Signature: _____ **Date:** _____

Print name: _____

APPOINTMENT REMINDERS

We would like your permission to send you appointment reminder's via text messaging and or via email. Please fill out the appropriate area's below concerning how you prefer to be reminded.

EMAIL ADDRESS: _____

CELL PHONE NUMBER: _____

CELL PHONE CARRIER: _____

SIGNATURE: _____ **DATE:** _____

PRINTED NAME: _____