

**Welcome to Eaton Rapids Family Dentistry
William R. Lindow, D.M.D., P.C.**

Thank you for choosing our office to meet your dental health care needs. It is our optimal goal to provide you and your family with the highest quality of dental care, while maintaining a friendly and relaxing environment. In order to keep our standard of care at a level that best serves your dental needs, we ask you to please observe the following guidelines.

Office and Financial Policies

- An adult must accompany children under 18 at each appointment. There is a Minor Child Treatment Release form available for those parents who are unable to attend their child's appointment.
- We require you to pay the co-payment, which is the amount not covered by your insurance company, at the time we provide service to you. For your convenience, we accept cash, check, Visa, MasterCard and Care Credit Line.
- We cannot emphasize too strongly that the extent of your insurance benefits is defined in a contract between you, your employer and your insurance company. While the filing of insurance claims is a courtesy that we extend to our patients, all charges are your responsibility from the date that the services were rendered. We will help you by processing your insurance claim form and sending it in promptly.

Collection Policy

- If your account is placed for collections, you agree to reimburse us the fees of any collection agency, which may be based on a percentage at a maximum of 35% of the debt, and all costs, and expenses, including reasonable attorneys' fees, we incur in such collection efforts.

I accept full financial responsibility for dental expenses incurred at Eaton Rapids Family Dentistry, William R. Lindow, D.M.D., P.C.

I accept full financial responsibility for failures on my part to provide or know my insurance benefits information at the time services are rendered.

I have read and understand the above conditions.

Signature of Responsible Party

Date