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LATE CANCELLATION AND NO SHOW POLICY

Personal Eyes LLC charges \$50 for any no shows or cancellations within 24 hours of your scheduled appointment time. This is in an effort to accommodate other patients who have been waiting for care. Payment of this fee is necessary before a new appointment will be scheduled. We reserve the right to request payment prior to rescheduling the missed or cancelled appointment.

Patients who are running late are asked to call the office as soon as possible to check with the staff.

We greatly appreciate your understanding and cooperation.

Patient Name: _____ Date: _____

Patient Signature:		
Patient Signature:		

Please sign below that you have read and acknowledge the above information.