



BELLEVUE OVERLAKE DENTAL

Your Smile for Life

Our Mission:

Welcome to our office! Whatever your dental needs, our team is here to provide outstanding care in a friendly, relaxed and professional environment. Our patients are our #1 priority and we are happy you found us! Everything we do has a singular purpose and this is to serve our patients well. We realize a visit to the dentist can be stressful, so we do everything we can to make your visit comfortable and worryfree.

**Should an emergency occur when we are away from the office,
please contact us at (206) 992-3309.**

Financial Policy: I understand that payments are required at time of service. I understand that methods of payment include: all major credit and debit cards, cash, check and long-term payment plans through CareCredit.

Cancellation Policy: I understand that a minimum of 48 hours' notice is required to change my scheduled appointments. If I fail to provide proper notice before rescheduling or canceling, I will be charged \$250 for doctor appointments and \$150 for hygiene appointments.

Photo Release: I hereby give permission to Bellevue Overlake Dental to use my photographs, related to My care, for education purposes and/or the marketing of his dental practice.
Please circle YES or NO

Patient Name: _____

Date: _____