

APPOINTMENT CONFIRMATION LETTER

Dear Parents,

This letter is to confirm your interest in scheduling an appointment with Dr. Eileen Comia.

In order to obtain an appointment, you need to submit the following:

1. Appointment Confirmation Letter
2. Patient Registration Form
3. **Nonrefundable** \$240 scheduling fee
4. ATC Financial Policy Agreement –read very carefully

Once received, we will contact you to schedule your appointment.

For the Initial Consultation, all **New Patients** must complete and submit the following (also called the Welcome Packet):

- ATC Questionnaire
- Informed Consent Form
- \$240 Deposit Fee
- Acknowledgement of Receipt of Privacy Notice

This packet must be returned to our office at least 10 days prior to your scheduled appointment. **Failure to return the packet in a timely manner will result in cancellation of your appointment and forfeiture of the scheduling fee.** (Please refer to the ATC Financial Policy Agreement.)

Please take note of the following:

- Avon Therapeutic Center does **not** participate with any insurance company.
- The \$240 Scheduling Fee is **nonrefundable**.
- The Welcome Packet is due **at least 10 days prior** to your scheduled appointment.

We are enforcing these policies to ensure that you are as committed as our office is towards your child's recovery.

If patient is a minor, both parents must sign and date below. If divorced, please provide proof of legal custody. Return this letter with the non-refundable scheduling fee, ATC Patient Registration form, and the completed ATC Financial Policy Agreement.

Printed Name of Patient: _____

Signature of Patient _____ Date _____

Printed Name of Father

Signature of Father

Date

Printed Name of Mother

Signature of Mother

Date



Eileen C. Comia, M.D.
Board Certified Int. Medicine
Defeat Autism Now!
Practitioner

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