

# Appointment Confirmation

Dear [Patient's Name],

We are writing to confirm your therapy appointment scheduled for:

**Date:** [Date]

**Time:** [Time]

**Location:** [Clinic Name, Address]

If you have any questions or need to reschedule, please do not hesitate to contact us at [Phone Number] or [Email Address].

Thank you, and we look forward to seeing you soon!

Sincerely,

[Your Name]

[Your Title]

[Clinic Name]