

# Therapy Session Confirmation

Dear [Patient's Name],

We are writing to confirm your scheduled therapy session.

**Date:** [Date of Session]

**Time:** [Time of Session]

**Location:** [Location of Session]

If you have any questions or need to reschedule, please feel free to contact us at [Contact Information].

Thank you for choosing our services. We look forward to seeing you!

Sincerely,

[Your Name]

[Your Title]

[Practice Name]