Vision Care Appointment Reminder

Dear [Patient's Name],

This is a friendly reminder that your follow-up vision care appointment is scheduled for:

Date: [Appointment Date] **Time:** [Appointment Time]

Location: [Clinic Name & Address]

Please ensure to bring any necessary documents and arrive at least 15 minutes early.

If you have any questions or need to reschedule, please contact us at [Clinic Phone Number] or [Clinic Email].

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

Sincerely,
[Your Name]
[Your Title]
[Clinic Name]