

Welcome to Our Pediatric Practice

Dear [Parent/Guardian's Name],

We are delighted to welcome you and your child to our pediatric practice! We understand that choosing a healthcare provider for your child is an important decision, and we are committed to providing your family with the highest level of care.

During your first appointment on [Date] at [Time], we will take the time to get to know your child, discuss their medical history, and address any concerns you may have. Please bring any relevant medical records and information about your child's health.

If you have any questions prior to your visit, feel free to contact our office at [Phone Number]. We look forward to meeting you and your child!

Warm regards,

[Your Name]

[Your Title]

[Pediatric Practice Name]

[Contact Information]