

Dental Care Appointment Confirmation

Dear [Patient's Name],

We are pleased to confirm your routine dental care appointment as follows:

Date: [Appointment Date]

Time: [Appointment Time]

Location: [Dental Clinic Name, Address]

Please arrive 10 minutes early to complete any necessary paperwork. If you have any questions or need to reschedule, do not hesitate to contact us at [Clinic Phone Number] or [Clinic Email].

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

Sincerely,

[Your Name]

[Your Position]

[Dental Clinic Name]