

Cancellation of Cosmetic Surgery Consultation

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Name of Clinic/Surgeon]

[Clinic Address]

[City, State, Zip Code]

Dear [Name of Surgeon or Receptionist],

I am writing to formally cancel my appointment for a cosmetic surgery consultation originally scheduled for [insert date and time]. Unfortunately, due to [insert reason if you wish], I will no longer be able to attend.

I appreciate the understanding and support from your team and apologize for any inconvenience this may cause.

Thank you for your attention to this matter.

Sincerely,

[Your Name]