

Dental Appointment Confirmation

Dear [Patient's Name],

We are pleased to confirm your dental check-up appointment.

Date: [Appointment Date]

Time: [Appointment Time]

Location: [Dental Clinic Name]
[Address]

Please arrive at least 15 minutes early to complete any necessary paperwork. If you have any questions or need to reschedule, feel free to contact us at [Phone Number] or [Email Address].

We look forward to seeing you!

Best regards,
[Your Name]
[Your Position]
[Dentist's Office Name]