

Vision Screening Appointment Notice

Dear [Patient's Name],

We are writing to inform you that your vision screening appointment has been scheduled as follows:

Date: [Insert Date]

Time: [Insert Time]

Location: [Insert Location]

Please arrive at least 15 minutes early to complete any necessary forms. If you have any questions or need to reschedule, feel free to contact our office at [Insert Phone Number].

Thank you for your attention to this important health matter. We look forward to seeing you soon!

Sincerely,

[Your Name]

[Your Title]

[Your Organization]

[Contact Information]