

New Patient Enrollment Confirmation

Dear [Patient's Name],

We are pleased to confirm your enrollment as a new patient at [Clinic/Hospital Name].

Your appointment is scheduled for: **[Date and Time]**

Location: **[Clinic/Hospital Address]**

Please bring the following items to your appointment:

- Photo ID
- Insurance Card (if applicable)
- Medical Records

If you have any questions or need to reschedule, please contact us at [Phone Number] or [Email Address].

We look forward to welcoming you to our practice!

Sincerely,

[Your Name]

[Your Position]

[Clinic/Hospital Name]