

# Urgent Care Visit Reservation Confirmation

Dear [Patient's Name],

Thank you for choosing [Urgent Care Center Name] for your healthcare needs. This is to confirm your reservation for an urgent care visit.

## Reservation Details:

**Date:** [Date]

**Time:** [Time]

**Provider:** [Provider's Name]

**Location:** [Urgent Care Center Address]

Please arrive at least 15 minutes before your scheduled time. If you need to reschedule or cancel, kindly contact us at [Contact Number] or [Email Address].

We look forward to seeing you soon!

Sincerely,

[Your Name]

[Your Position]

[Urgent Care Center Name]

[Contact Information]