

Hospital Parking Validation Process

Dear [Patient's Name],

Thank you for choosing [Hospital Name] for your healthcare needs. We want to make your visit as convenient as possible. Below is the parking validation process for your appointment scheduled on [Appointment Date].

Parking Details

Location: [Parking Garage/Location Details]

Parking Hours: [Parking Hours]

Validation Process

1. Upon arriving at the hospital, please park your vehicle in the designated visitor parking area.
2. Retain your parking ticket, which will be issued upon entry.
3. After your appointment, visit the validation kiosk located at [Location of Kiosk] or present your ticket at the reception desk.
4. Your parking fee will be validated based on the duration of your appointment.

Contact Information

If you have any questions regarding the parking validation process, please contact our patient services team at [Phone Number] or [Email Address].

We look forward to seeing you soon.

Sincerely,

[Your Name]

[Your Title]

[Hospital Name]