



We're glad you chose Bite Dental Studios

To ensure we're all on the same page we require you to read, understand, and sign these Consultation and Financial Guidelines prior to your treatment.

APPOINTMENTS

All appointments are considered confirmed two (2) business days prior.

CANCELLATIONS AND RESCHEDULES

We understand that sometimes circumstances dictate appointment changes and we don't charge for rescheduling appointments provided 48 hrs advance notice is given. To provide efficient and high value care to all of our clients we do charge a late cancellation or change of appointment fee if less than two days notice is given. If you miss an appointment a fee will be charged. Please note we do not change appointments via email.

ADDITIONAL COSTS

During your initial appointments our Dentists may require x-rays and impressions of your teeth. These will be charged in addition to your consultation fee.

PRIVATE HEALTH FUNDS

Bite Dental will assist by processing your Health Fund claims at the time of your consultation, and the remainder of fees will become your full immediate responsibility. Payment by cheque and electronic bank transfer must be made two days in advance of your appointment.

DENTAL CONSULTATION FEES

Bite Dental Studios is committed to providing you with exceptional quality care and treatments. For these services, we charge what is usual and fair. You will be advised of the fees involved before your

treatment begins. Should you have any financial concerns it is your responsibility to discuss this with us before your treatment has started.

PAYMENT

Full payment is due at the time of treatment. We accept HICAPS, cash, eftpos, electronic bank transfers (in advance), cheques (in advance) and credit cards. We offer an extended payment plan with prior credit approval.

CONDITIONS FOR CLIENT COMFORT

To ensure the confidentiality of our clients and staff and to make sure your appointments are on-time, we do not allow photographic and video cameras to be used in our surgeries. For the comfort of all clients we ask that mobile phones be switched to silent or off.

PRIVACY STATEMENT

The information we collect from clients forms a confidential and private agreement between yourself and Bite Dental Studios. Sensitive health information is collected with your consent. Bite Dental will protect the information from any misuse and loss. Client details will only be discussed with the individual or individual's guardian. Further details of our Privacy Policy are available at bitedental.com.au

Should you have any questions or concerns regarding the above please contact us prior to your appointment—we're eager to help you.

CONSENT TO PROCEED

I have read and understood these details and conditions and agree to meet my responsibilities as outlined above.

Client's name (please print).....

Client or Responsible Guardian's signature Date