

WELCOME  
To the office of  
Dr. Sheridan Cyrus, DDS

OUR PAYMENT POLICY

We request payment at the time of your dental treatment. We have made and will continue to make every effort to make payment for your treatment as convenient as possible.

Accounts over 60 days will be assessed an interest fee of 24% per annum. We will help you seek settlement for a reasonable period of time.

As a COURTESY to you, we will work with you and your Insurance Company to help you receive the maximum benefits available under your policy. However, we expect you to pay any insurance deductible plus any co-payments at the time of your treatment.

For us to bill your insurance, please make certain your insurance information is always current. Please remember, coverage is between you and your insurance company. They may NOT cover ALL dental costs, e.g. major restorative services such as crowns, bridges and dentures. Be prepared to work with your Insurance Company yourself, if we are not able to gain settlement.

I ASSIGN MY PAYABLE DENTAL INSURANCE BENEFITS TO DR. SHERIDAN CYRUS.

**I UNDERSTAND THAT I AM RESPONSIBLE FOR THE COST AND PAYMENT OF MY DENTAL TREATMENT WHETHER I HAVE INSURANCE OR NOT AND THAT I WILL PAY FOR MY CARE ACCORDING TO THE POLICIES OF THIS OFFICE.**

\*\* Signature \_\_\_\_\_ Date \_\_\_\_\_

For those patients whose insurance contracts do not allow assignment of benefits (meaning they do not pay the dentist, only the patient) payment is requested at the time of service, we accept all major credit cards or debit. As a courtesy to you, we also allow post dated cheques for those who are in good credit standing.

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