

Benton Family Dental

149 Portsmouth Ave.

Stratham, NH 03885

(603) 772-3264



Cancellation Policy

- A \$50 deposit is required for all new patient appointments.
- 50% of your copay is required as a deposit when scheduling all basic restorative appointments.
 - A \$100 deposit is required for all crown (or major restorative) appointments.
 - All deposits will be collected at the time of scheduling.
- Your deposit is fully refundable if your appointment is cancelled with at least 48-business hours' notice.
- For new patients:
 - If you decide to move forward with treatment, your deposit may be applied to future appointments.
 - If no treatment is diagnosed, we are happy to refund your deposit once all insurance claims are closed.

Patient Signature: _____

Date: _____

Consent Form

I give permission to Dr. Benton and his staff to discuss my care and any financial information with the following individual(s):

Name(s) and Phone Number(s):

If you do not wish to authorize us to speak with anyone regarding your care or financials, please leave the line above blank.

Patient Signature: _____

Date: _____