

APPOINTMENT SLIP

M _____

Has an appointment with

On

Mon. _____ At _____

Tues. _____ At _____

Wed. _____ At _____

Thurs. _____ At _____

Fri. _____ At _____

Sat. _____ At _____

Sun. _____ At _____

IF UNABLE TO KEEP THIS APPOINTMENT, PLEASE GIVE 24 HRS. NOTICE.