

**GREETINGS FROM YOUR CHIROPRACTOR, \_\_\_\_\_**

LOCATED AT \_\_\_\_\_ (\_\_\_\_) \_\_\_\_ - \_\_\_\_

*This is to remind you that it is time for your:*

- ☐ Scheduled Treatment on \_\_\_\_\_
- ☐ Check up for \_\_\_\_\_
- ☐ Diagnostic Appointment on \_\_\_\_\_
- ☐ Follow-Up Appointment



*We are currently scheduling for the following time period:*

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec

*Please write your appointment below as a convenient reference:*

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