

## DEPOSIT RECEIPT

## DATE

PATIENT INFORMATION		
Name:		
Total Procedure Cost:	Hair Transplant	Beard Transplant
DEPOSIT	METHOD	DATE
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AMOUNT TO SETTLE	PROCEDURE DATE	
NOTE		
	SIGNATURE	

## CONTACT

55 3967 0225 atencionaclientes@losreyesdelinjerto.com Anillo Perif. 3332 piso 9 oficina A910, Jardines del pedregal, Álvaro Obregón, 01900 CDMX www.losreyesdelinjerto.com

In case you do not receive your receipt, please contact the following number:  ${\bf 33~2384~6838}$ 

## **TERMS AND CONDITIONS**

The Patient may cancel or modify the Service booked as long as they notify Los Reyes del Injerto with at least seven business days before the Procedure Date. The Patient acknowledges and agrees that if they cancel the Service outside of this timeframe, Los Reyes del Injerto will retain the total deposit as an Administrative Fee. Refund requests will only be processed within the next thirty calendar days from the payment date, and only if the entire service has not been rendered. After this period, Los Reyes del Injerto will not issue any monetary refunds; however, the Patient may choose to exchange the deposit for other services and products.