

# DE ZAVALA DENTAL

5999 DE ZAVALA RD, # 122  
SAN ANTONIO, TX 78249  
210-691-1333 / 210-561-2599 FAX

## FINANCIAL AGREEMENT

Your insurance policy is a contract between you and your insurance company. We cannot accept the responsibility of negotiating claims with your insurance company and/or other persons, additionally we cannot guarantee payment of your claims. The patient is responsible for payment of his/her dental charges within a reasonable time regardless of the status of the claim with your insurance. In circumstances where a claim is pending or when treatment may be for an extended time, it is recommended that payments be made to keep your account current.

We encourage our patients to discuss any questions you may have regarding our polices, so we may provide the best dental care.

I have read and understand the above financial agreement. A photocopy and/or carbon copy of this agreement are to be considered as valid as an original.

\_\_\_\_\_  
Patient/Guardian Signature

\_\_\_\_\_  
Date