

2252 W. Cermak Rd
Chicago, IL 60608

Perez Eye Care

www.perezeyecare.com

25 E. Washington St, #820
Chicago IL, 60602

DILATION

The dilation is covered through your VISION insurance (VSP, Spectera, Eyemed, Davis, etc) when it is performed at the **same time** as your routine vision exam.

You will be blurry at near and sensitive to bright lights for 4 to 6 hours.

Disposable sunglasses will be provided.

Please circle **if you will be dilated today: YES or NO**

APPOINTMENT CANCELLATION OR NO SHOW POLICY

24 hr notice is needed to cancel an appointment

\$10 fee for Saturday appointments

Family of 3 or more \$10 fee **per** person

DEPOSITS

Deposits for orders **not** picked up within 45 days will be forfeited and the materials returned.

Problem with your order **must** be notified to PEC within 3 weeks of notification date

ALL orders are **FINAL** and cannot be returned, cancelled or exchanged.

Patient Name: _____

Date: _____

E-mail Address: _____

Preferred Phone #: _____