

[Date]

To the [Parent/Guardian Last Name] Family,

Welcome to [Clinic Name]!

We are delighted to welcome [Child's Name] and your entire family to our pediatric practice. It is a privilege to partner with you in supporting your child's health, growth, and development.

At our office, we strive to provide compassionate and comprehensive care. Whether it is a routine wellness check, a sick visit, or guidance on developmental milestones, our team is here to support you every step of the way.

Practice Information:

- **Office Hours:** [Insert Hours]
- **Phone Number:** [Insert Phone Number]
- **After-Hours Care:** [Insert Instructions or Nurse Line]
- **Patient Portal:** [Insert Link/Instructions]

Your first appointment is scheduled for **[Date] at [Time]**. Please remember to bring your insurance card and any previous immunization records.

If you have any questions before your visit, please do not hesitate to call us. We look forward to meeting you and your little one soon!

Warmly,

[Doctor's Name/Signature]

[Practice Name]

[Office Address]