

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Welcome to [Name of Holistic Women's Health Center]

Dear [Patient Name],

Welcome to our center. We are honored that you have chosen us to partner with you on your journey toward optimal health and wellness. Our mission is to provide comprehensive, integrative care that honors the connection between your body, mind, and spirit.

At [Name of Center], we look forward to providing you with a personalized experience. Your first appointment is scheduled for:

- **Date:** [Date of Appointment]
- **Time:** [Time]
- **Provider:** [Provider Name]

To prepare for your first visit, please complete the enclosed intake forms and bring any current supplements or medications you are taking. We recommend arriving 15 minutes early to finalize your registration.

Our services include [List Services, e.g., nutritional counseling, acupuncture, hormone balancing, and mindful wellness]. If you have any questions before your visit, please call us at [Phone Number] or visit our website at [Website URL].

We look forward to meeting you and supporting your path to wellness.

In health,

[Signature]

[Name of Director/Founder]

[Name of Holistic Women's Health Center]