

Dear Patient,

Welcome to **[Clinic Name]**. Thank you for choosing us for your healthcare needs. We are committed to providing you with high-quality, convenient medical care.

To help us serve you better during your first visit, please review the following information:

1. Registration

Upon arrival, please check in at the front desk. You will be asked to complete a new patient registration form and a brief medical history questionnaire.

2. What to Bring

Please have the following items ready:

- A valid government-issued photo ID
- Your current health insurance card
- A list of any medications or supplements you are currently taking
- Records of recent immunizations or relevant test results

3. Payment and Insurance

Co-payments and payments for non-insured services are due at the time of your visit. We accept **[List Payment Methods, e.g., Cash, Credit Cards]**.

4. Clinic Hours

We are open during the following hours: **[Insert Days/Hours]**. No appointment is necessary, as we operate on a walk-in basis.

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 seeing you soon.

Sincerely,

The Staff at **[Clinic Name]**