

3450 acworth due west rd. bldg.200 suite 220 kennesaw, ga 30144 tel: 770.794.6643 fax: 770.794.6683 www.crawfordplasticsurgery.com

## **Consultation Fee**

I agree to pay the following for a virtual consultation with one of our doctors at Crawford

Plastic Surgery.

**\$120.00** for a phone consultation with Crawford Plastic Surgery

Credit Card Number	Exp	Code	
Name on Card			

I am completely aware if for whatever reason I miss my scheduled consultation, I then

forfeit my consultation fee. I am also aware that my consultation fee does not go towards

my surgery fee.

Patient Signature

Date