



Orcas Family Health Center
1286 Mt. Baker Rd., Eastsound, WA 98245

Phone: 360-376-7778
Fax: 360-376-7706

Patient Information Form - Minor

Patient

Legal Name: First _____ MI ____ Last _____

Maiden/Other _____ Date of Birth _____ Soc. Sec. # _____ Gender _____

Mailing Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Cell Phone _____ E-Mail _____

Employer _____ Student : Y N Full Time Part Time

Married: Y N Preferred Language _____

Race/Ethnicity: Asian Caucasian African American Hispanic/Latino

Native American/Alaska Native Native Hawaiian/Pacific Islander

Responsible Party/Guarantor

Name _____ Relationship: _____

Mailing Address _____ City _____ State _____ Zip _____

Home Phone _____

Insurance

Insurance Carrier _____ Policy Number _____

Primary Care Provider _____

Policy Holder _____ Father Mother Spouse Birth Date _____

Emergency Contact

Name _____ Relationship _____

Home phone _____ Work _____ Cell _____

In the event that a parent/guardian is not able to be present with the minor at his/her appointment, who is authorized to accompany the minor?

Name _____ Relationship _____ Phone _____

Acknowledgement and Signature for Release, Assignment, Financial Responsibility, and Privacy Notice:

I hereby give permission for the above patient to receive treatment which the attending medical practitioner considers necessary. If insured, I authorize my insurance benefits be paid directly to Orcas Family Health Center and I will be responsible for any balance due not paid by my insurance and authorize the provider/insurance company to release any information required to process my medical claims. If I do not have insurance, I understand that I am responsible for payment of all charges. I agree with the financial policy and acknowledge receipt and Notice of Privacy Practices, describing how my health information may be used or disclosed.

Signature X _____ Date _____

Relationship _____ (i.e. mother, father, etc.)

For office use

Entered in Healthwind _____ Entered in Chart Connect _____ Updated 11/2019