Jeff Paley, MD PC Doron Katz, MD Shara Paley, MS RD

PATIENT REGISTRATION

Welcome to our office. In order to serve you properly, we will need the following information.**(Please Print)**
All information will be kept strictly confidential.

Patient's Name	**Sex** M [ ] F [ ]	Birth Date ____/____/_____ Age:	**Marital Status** Single [ ] Married [ ] Widowed [ ] Divorced [ ]
Residence address City State Zip --- **Email:** How do you prefer we contact you for routine matters? (circle one) **Email Phone Either**			**Patient's Social Security #**
TELEPHONE **Home:** **Cell:** **Business:** **Pager:** **Preferred method of reaching you? (circle one: Home Business Cell Pager)**			**FAX** **Is this an Automated Fax Line or do we need to call you first?(Circle One)** Automated Call first
Credit Card Information: [ ] Mastercard [ ] Visa [ ] Discover [ ] American Express ID Number:		Expiration Date:	Name On Card
Name of employer Address:			Occupation

Name of Spouse/Parent	Birth date	Social security #	Business phone
Referred by:			
Person to contact in case of emergency:	Relationship to patient	Phone	

Medicare Yes [ ] No [ ]	Medicare #	Medicaid Yes **[ ]** No **[ ]**	Medicaid #	Effective Date
Medicare Secondary insurance name Address			Policy #	Group #

Primary insurance company Address			Is insurance through your employer?
Subscriber Name	Subscriber birth date	Policy #	Group #
Secondary insurance name Address		Policy #	Group #

Private Insurance Authorization for Assignment of Benefits/Information Release:

I, the undersigned authorize payment of medical benefits to Jeff Paley, MD PC, for any services furnished me by the physician. I understand that I am financially responsible for any amount not covered by my contract. I also authorize you to release to my insurance company or their agent information concerning health care, advice, treatment or supplies provided to me. This information will be used for the purpose of evaluating and administering claims of benefits.

_____ _____

Patient, Parent or Guardian Signature (if child is under 18 years old) Date