

Patient Demographic Form

CHILD AND ADOLESCENT

Please PRINT

DATE: _____

PATIENT INFORMATION			
LAST NAME	FIRST NAME	MI	NICKNAME
DATE OF BIRTH	SOCIAL SECURITY NUMBER	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	
GUARDIANSHIP STATUS <input type="checkbox"/> Biological Parent <input type="checkbox"/> Non-Parent Relative <input type="checkbox"/> DCS Custody <input type="checkbox"/> Other			
HOME ADDRESS	CITY	STATE and ZIP CODE	
HOME PHONE	CELL PHONE	WORK PHONE	
FATHER'S NAME	FATHER'S DATE OF BIRTH	FATHER'S SOCIAL SECURITY NUMBER	
MOTHER'S NAME	MOTHER'S DATE OF BIRTH	MOTHER'S SOCIAL SECURITY NUMBER	
PRIMARY CONTACT'S EMAIL ADDRESS			
PATIENT'S EMPLOYMENT STATUS <input type="checkbox"/> Employed – Full Time <input type="checkbox"/> Employed – Part Time <input type="checkbox"/> Student – Full Time <input type="checkbox"/> Student – Part Time			
SCHOOL	COUNTY	CURRENT GRADE	
PHYSICIAN REFERRAL INFORMATION			
PRIMARY CARE PHYSICIAN		PHYSICIAN PHONE NUMBER	
RESPONSIBLE PARTY and INSURANCE INFORMATION			
POLICY HOLDERS NAME	RELATIONSHIP TO PATIENT	POLICY HOLDERS DATE OF BIRTH	
POLICY HOLDERS SOCIAL SECURITY NUMBER	POLICY HOLDERS HOME NUMBER	POLICY HOLDERS WORK NUMBER	
POLICY HOLDERS HOME ADDRESS	CITY	STATE and ZIP CODE	
POLICY HOLDERS EMPLOYER		EMPLOYERS PHONE NUMBER	
INSURANCE CARRIER	POLICY NUMBER	GROUP NUMBER	
EMERGENCY CONTACT INFORMATION			
LAST NAME	FIRST NAME	RELATIONSHIP TO PATIENT	
HOME NUMBER	CELL NUMBER	WORK NUMBER	
METHODS OF COMMUNICATION			
DO WE HAVE PERMISSION TO CONTACT YOU AT WORK?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
DO WE HAVE PERMISSION TO CONTACT YOU AT HOME?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
DO WE HAVE PERMISSION TO SEND MAIL TO YOUR HOME?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
DO WE HAVE PERMISSION TO LEAVE A MESSAGE ON YOUR ANSWERING MACHINE?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
DO WE HAVE PERMISSION TO SEND YOU EMAIL?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
WHERE DID YOU HEAR ABOUT RIGHTEOUS OAKS?			