Harmony Community Clinic

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New Patient Registration

Please print clearly. Bring a photo ID and, if applicable, your insurance card.

Patient information

Last name _____ First name _____ Middle name _____

Preferred name _____ Date of birth (MM/DD/YYYY) _____ Sex assigned at birth _____ Gender identity (optional) _____

Street address _____ Apt / Unit _____

City _____ State _____ ZIP code _____

Cell phone _____ Other phone _____ Email _____

Occupation _____ Employer _____ Marital status _____

Preferred language:

☐ English ☐ Español ☐ Other: _____

Emergency contact

Full name _____ Relationship _____ Phone _____

Care team and pharmacy

Primary care provider (if other than this clinic) _____ Phone _____

Preferred pharmacy _____ Pharmacy phone _____ Pharmacy address / city _____

Payment and insurance

☐ Self-pay ☐ Insurance (complete below)

Insurance company _____ Member ID _____ Group number _____

Policy holder name _____ Policy holder date of birth _____ Relationship to patient _____

How did you hear about us?

- ☐ Instagram
- ☐ Facebook
- ☐ Google
- ☐ Friend or family
- ☐ Community event
- ☐ Other: _____

Services you are interested in

- ☐ Primary care
- ☐ Weight management
- ☐ IV therapy
- ☐ Vitamin injections
- ☐ Peptide therapy
- ☐ Hormone therapy
- ☐ Botox / neurotoxins
- ☐ Dermal fillers
- ☐ SculpSure body contouring
- ☐ Hydrodermabrasion facial
- ☐ Other: _____

I confirm that the information on this form is true and complete to the best of my knowledge. I will inform Harmony Community Clinic of any changes to my personal, contact, or insurance information.

Signatures

By signing below, I confirm that I have read this form (or had it read to me) in a language I understand, that I had the opportunity to ask questions and all of my questions were answered, and that I agree to its terms voluntarily.

Patient name (print)	Patient signature	Date

Parent / guardian / legal representative (print, if applicable)	Relationship to patient	Representative signature	Date

Tell us about your visit

Your opinion helps other families find quality care. After your visit, scan this code with your phone camera to leave Harmony Community Clinic a review on Google.

Thank you for trusting us with your health.