



## New Patient Registration Form

**\*\*Please note that our doctors do not do WCB assessments or complete any forms for walk in patients\*\***

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Birth (M/D/Y) \_\_\_\_\_

Gender: \_\_\_\_\_

Address, City and Postal Code:  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Alberta Health Care #: \_\_\_\_\_

**\*\*For Out of Province Patients Only\*\***

Health Care Number: \_\_\_\_\_

Out of Province

Address: \_\_\_\_\_

Have you permanently moved to Alberta? Yes No

If YES, have you applied for Alberta Health Care? Yes No

*\*\*Please note: if you have permanently moved to Alberta, your out of province health care card is only valid for 3 months. If your out of province health care is not valid, you will be responsible to pay for your visit.\*\**

**Emergency Contact Information:**

Name and Relationship: \_\_\_\_\_

Contact Number: \_\_\_\_\_

**Our doctor may use secure, HIPAA-compliant software that helps record and write notes from your visit. This helps make sure your medical records are accurate.**

Patient Signature: \_\_\_\_\_

Today's Date: \_\_\_\_\_