Charles R. Herring, D.C., D.A.B.C.C., F.I.C.C.
9270 Siegen Lane, Suite 402
Baton Rouge, Louisiana 70810
(225) 819-8924
Fax (225) 819-8928

PATIENT INFORMATION

Patient's Name _____ Sex _____ Date of Birth _____

Marital Status _____ Social Security Number _____

Address _____ City _____

State _____ Zip Code _____ Phone Number _____

Employer _____ Work Number _____

Emergency contact _____ Phone Number _____

INSURANCE INFORMATION (See Attached)

Group ____ Private ____ Workers' Comp ____ Automobile ____

Insurance Company _____

Address _____ City _____

State _____ Zip _____

Name of Insured _____ Relationship to Insured _____

Social Security Number of Insured _____ Date of Birth of Insured _____

Policy Number _____ Group Number _____

Phone No. _____ Fax No. _____

ATTORNEY INFORMATION

Name _____

Address _____ City _____

State _____ Zip _____

Telephone No. _____ Fax No. _____

SIGNED _____ DATE _____