



Philip Borgardt, MD, Inc New Patient Registration

Please Print

Today's Date					
PATIENT INFORMATION					
Full Legal Name (First) (Middle) (Last)					Email address
Address (Number)		(Street)		(Apt. No.)	Home Phone
City			State	Zip	Cell Phone
					Cell Phone Provider
Date of Birth			Age	Sex	Marital Status
					Occupation
Employer Name		Employer Street Address			City
					State
					Zip
Business Phone (Including Extension)					
Are you on Medicare?					
How Did You Hear About Us?					
SPOUSE'S INFORMATION					
Full Legal Name (First) (Middle) (Last)					Occupation
Address (If Different From Above)			City		State
					Zip
					Home Phone
Employer Name		Street Address		City	State
					Zip
					Business Phone (Ext)
EMERGENCY INFORMATION					
Person to Notify in Case of Emergency					Relationship
Address (Number)		(Street)		(Apt. No.)	
City				State	Zip
					Home Phone
INFORMATION FOR THE PATIENT					
<ol style="list-style-type: none"> 1. Patients who carry standard health insurance should remember that professional services are rendered and charged to the patient and not to the insurance company. All patients with standard health care insurance are expected to make payment as services are rendered, regardless of pending insurance, litigation, etc. 2. If you have any questions we will, of course, be happy to assist you. 					

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BAY AREA: 101 Park Place, Ste 200, San Ramon, CA 94583

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