

TO PARENTS WHOSE FORMER SPOUSE HOLDS SOME RESPONSIBILITY FOR PAYMENT

Over the years, we have found that there is a wide range in the degree of responsibility taken by prior spouses who are required through divorce decree to pay for medical services for their children. Obviously, we are not a legal party to any divorce agreement. Therefore, we ask that you, the parent bringing the child in for services, be responsible for providing a copy of the section of your divorce decree that indicates custody of the children you are bringing to therapy and who is responsible for payment of medical services. The parent bringing the child for services must bring the copay and/or deductible at the time services are rendered.

INSURANCE AND BILLING INFORMATION

Child's Name:

Name of person who brings child to therapy:

Parents Name:

Parents Address:

(Street)

(City)

(State)

(Zip)

Parents phone numbers:

(Home)

(Work)

Parent's social security number:

I have legal custody of this child and am therefore allowed to initiate therapy.

(Signature)

INSURANCE SUBSCRIBER INFORMATION

Name of parent who carries primary insurance for child:

Parent's date of birth:

Parent's social security number:

Parents Address:

(Street)

(City)

(State)

(Zip)

Parents phone numbers:

(Home)

(Work)

SECONDARY INSURANCE INFORMATION

Name of parent who carries primary insurance for child:

Parent's date of birth:

Parent's social security number:

Parents Address:

(Street)

(City)

(State)

(Zip)

Parents phone numbers:

(Home)

(Work)