

Achieve Health Chiropractic and Clinical Nutrition

111 East Indiana Ave, Maumee, OH 43537

Dr. Elia Acuna DC, DACBN, LLP

419-740-3099

Patient Registration Information

() Single () Married () Widowed () Separated () Divorced

Name: (L) _____ (F) _____ (MI) _____ Sex: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: (C) _____ email _____

Birth Date: _____ Social Security: _____

Occupation: _____

Employer: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Ext: _____

Reason for visit: _____

Condition Related to: () Illness () Employment () Auto () Other

Emergency Contact: _____ Phone _____

DO () DO NOT () give permission for the doctor/staff to give any medical information to a family member

DO () DO NOT () give permission for doctor/staff to leave messages or voice mail regarding appointments or follow-up

The Undersigned acknowledges that he/she has requested treatment from Dr. Elia Acuna and in consideration thereof agrees to be fully and personally responsible for all charges incurred.

Patient Signature: _____ Date: _____

Printed Name: _____