



8975 E Golf Links
 Tucson, AZ 85730
 520-886-6054
 fax 520-886-6571
www.dcgil.org

Welcome to our office!

In order to serve you properly, we will need the following information. All information will be strictly confidential.

Date _____

Patient Name: _____
 Last First Middle Initial Nickname

What is your e-mail address? _____

Whom may we thank for referring you? _____

Address: _____
 (If PO Box, please give street address also)

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Alternate (emergency) phone: _____ Name: _____ Relationship _____

Patient Date of Birth: _____ Patient Social Security # _____ - _____ - _____

Billing information (if different from above)

Name of responsible party: _____

Address: _____ Relationship to patient _____

Home Phone: _____ Work Phone: _____ Cell: _____

Social Security # _____ Employer's Name: _____

A firm financial arrangement is required before treatment.

We accept the following payment options. Please indicate your choice below.

Initial _____ Cash _____ Check _____ Mastercard _____ Visa _____ Discover _____ Care Credit _____

Do you have dental insurance? No _____ Yes _____

Primary Insurance**

Name of employed person: _____ Employer _____

Birth date of employed person _____ Insurance ID # of Insured _____

Name of dental insurance company _____ Group Number _____

Secondary Insurance**

Name of employed person: _____ Employer _____

Birth date of employed person _____ Insurance ID # of Insured _____

Name of dental insurance company _____ Group Number _____

****Please present your insurance card so that we may make a copy for your record.**

Name of Medical Insurance Company(s) _____

I hereby authorize my insurance benefits to be paid directly to Dental Care on Golf Links, PLC. I also authorize the doctor to release any information required to process insurance claims. I will pay any balance after insurance has paid.

Date _____ Signature _____

(insured person)

Date _____ Signature _____

(patient or parent/guardian of minor patient)

Dental Care on Golf Links will pursue any and all collection efforts including referring the account to a collection agency and/or attorney and reporting to the credit bureau. The account will be assessed all additional collection charges associated with the collection of debt including but not limited to collection agency fees, reasonable attorney's fees, court costs and all other charges allowed by law not to exceed 50% of the total charges.