Ridge Family Practice, P.C.

• Clarine I. Coker, M.D.
• Alan J. Pokorski, P.A. • Tammy L. Hunke P.A.-C.

Patient Registration

Patient Information

First Name: _____ MI: _____ Last Name: _____

Birth Date: _____ SSN: _____ - _____ - _____ Sex: ☐M ☐F

E-mail Address: _____ Marital Status: ☐S ☐M ☐W ☐D

Address: _____ City: _____ State: _____

Zip: _____ Primary Phone: _____ Cell Phone: _____

Spouse Information

Name: _____ Birth Date: _____

Address: _____ City: _____ State: _____

Zip: _____ Primary Phone: _____ Cell Phone: _____

Emergency Contact Information:

Name:_____ Relationship to patient: _____

Address:_____ City:_____ State:_____

Zip:_____ Phone:_____ Cell Phone:_____

Race

☐ Caucasian ☐ African American

☐ Hispanic ☐ Asian

☐ Other(please specify) _____

Ethnicity

☐ Hispanic or Latino

☐Not Hispanic or Latino

☐ Unknown/Unreported

(Continued on next page)

201 Ridge St. #201
Council Bluffs, IA 51503
Phone: (712)322-5899
Fax: (712)322-5730

Primary Language

☐ English ☐ Spanish ☐ Chinese ☐ French ☐ German ☐ Japanese

☐ Korean ☐ Deaf Services ☐ Multiple Languages ☐ Sign Languages

☐ Unknown/Unreported ☐ Other (please specify) _____

Employment Information:

Employer: _____ Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Financial Information:

Primary Insurance: _____ Secondary Insurance: _____ ☐N/A

Name of Primary Insurance Holder: _____

SSN: ____ - ___ - ____ Birth Date: _____

Name of Secondary Insurance Holder: _____

SSN: ____ - ___ - ____ Birth Date: _____

Primary Method of Payment: ☐ Cash ☐ Credit Card ☐ Debit Card ☐ Check

Patient Signature: _____ Date: _____

Witness Signature: _____ Date: _____

** Failure to meet the co-pay obligations at the time of service, as required by your insurance carrier, will result in a $10.00 co-pay rebilling fee.*

*** I understand that by signing this form I agree that I am financially responsible for any balance incurred for services provided to me or my dependants. All past due balances will be charged a 1.5% service fee. All balances over 120 days old will be turned over to an outside collection agency.*