

Current Patient Registration Update

Things change and it is important to keep your doctor updated when they do. The most common changes are demographic changes. Please use this form to update your current information with your doctor. You can also update this information electronically on your Athena Patient Portal.

Address Change

Old Address: _____

New Address: _____

New address effective Date: _____

Phone Number Change or Additional Phone Number

Discontinued Phone Number: _____

(If applicable)

New Phone Number: _____

Is this phone your primary or secondary phone? _____

Is this a cell phone? YES NO

Is there anything else we should know

(for example, this is my daughter phone if you cannot reach me):

New Insurance - Primary or Secondary Insurance

We ask that you please bring your insurance card to your scheduled visit so the office can scan it for complete accuracy of benefits and insurance coverage.

Pharmacy Change

Pharmacy Name: _____

Pharmacy Address: _____

I acknowledge the above information is complete and accurate:

Signed: _____ Date: _____