MEIER
FAMILY CHIROPRACTIC
—ADJUST YOUR LIFE—

Dr. Kimberly Meier
Dr. Jeffery Meier
Dr. Donald Smith
Dr. Tilene Figeroa

3419 Central Ave. Suite C, Billings, MT 59102
Phone: (406) 651-5433 Fax: (406)281-8116

AUTHORIZATION TO RELEASE HEALTHCARE INFORMATION

Patient's Name: _____ Date of Birth: _____

Previous Name: _____

I request and authorize: Meier Family Chiropractic_____ to release healthcare information of the patient named above to:

Name: _____

Address: _____

City: _____ State: _____Zip Code: _____

This request and authorization applies to:

- Healthcare information relating to the following treatment, condition, or dates:
  _____
  _____
- Yes or No I Authorize the release of any records regarding previous Chiropractic care, x-rays, reports, MRI's, CAT scans and physical exams to the person(s) listed above.
- X-ray, MRI, CT scans on disc, fax reports to office
- Other: _____

Patient Signature: _____ Date Signed: _____

THIS AUTHORIZATION EXPIRES NINETY DAYS AFTER IT IS SIGNED