

REX URGENT CARE OF CARY
1515 S.W. Cary Parkway, Suite 130
Cary, North Carolina 27511

REX URGENT CARE OF WAKEFIELD
14501 New Falls Of Neuse Road
Raleigh, North Carolina 27614

REASON FOR VISIT TO URGENT CARE _____ Patient Acct. No. _____

I. PATIENT INFORMATION

Lab / Radiology Information

SS# _____ Last Name _____ First Name _____ M.I. _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Birthdate _____ Sex _____ Marital Status _____ Race _____

Employer _____ Employer Address _____

Mother's Maiden Name _____ Father's Name _____

Contact Person in Case of Emergency _____ Phone No. _____

II. POLICY HOLDER INFORMATION (Other than Patient)

SS# _____ Last Name _____ First Name _____ M.I. _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Birthdate _____ Sex _____ Marital Status _____

Employer _____ Employer Address _____

III. PARTY/PERSON ACCOMPANYING A MINOR

SS# _____ Last Name _____ First Name _____ M.I. _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Birthdate _____ Sex _____ Marital Status _____

Employer _____ Employer Address _____

IV. MEDICAL INSURANCE INFORMATION

Primary Insurance _____ Policyholder's Name _____

Secondary Insurance _____ Policyholder's Name _____