

Barrack Street Practice Visitor Registration Form

This form is for patients who are only visiting Tasmania and who do not intend to have Barrack Street Practice as their regular GP service.

Date:/...../.....

Title:	(Dr, Mr, Mrs, Ms, Miss, Master, Other)		
Surname:			
First name:		Middle Name:	
Preferred Name:		Date of Birth:	
Gender:			
To ensure that your doctor provides you with the appropriate healthcare, are you ?			
Aboriginal <input type="checkbox"/> Torres Strait Islander <input type="checkbox"/> Aboriginal & Torres Strait Islander <input type="checkbox"/>			
Ethnicity (other)			
Street Address:			
Postal Address <i>(if different to street address)</i>			

Home Ph:	Work Ph:	Mobile Ph:
Email:		
Occupation:		
Medicare Number:	Ref No:	Expiry Date
Pension Card Type:	Expiry Date:	
DVA Number	DVA Card Colour	
Accepted conditions if DVA White/Orange Card		
Next of Kin: <i>(Name, Address & Ph No)</i>		
Relationship to Patient		
Emergency Contact <i>(If different to Next of Kin)</i>	<i>(Name & telephone number of the person we can contact if needed)</i>	

Please read the billing information below:

Barrack Street Practice is a private billing practice. A consultation fee will apply to all new patients without exception.

Bulk Billing will only be available to eligible patients following the first paid consultation. Only patients who are under 12 years of age, are 70 years of age and over with a current health concession card or are the holders of a DVA Gold Card / White Card (specific conditions) will be bulk billed.

Please speak with the reception staff for more detailed fee information.

Signature:

Date:/...../.....

Thank you for your co-operation & please return the completed form to reception