

WATERSIDE MEDICAL SERVICES, INC.

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Panama City Beach, FL 32407
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Santa Rosa Beach, FL 32459
Phone: 850-622-0062
Fax: 850-622-0007

1421 East Nine Mile Rd.
Pensacola, FL 32514
Phone: 850-484-7735
Fax: 850-484-7736

www.WatersideMed.com

Medical Information Release Form

Name: _____

Date of Birth: _____

Account Number: _____

Release of Information

Check here:

I authorize the release of information including the diagnosis, records, examination rendered to me and claims information. This information may be released to:

	Name:	Relationship:	Phone Number:
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

This release of information will remain in effect until terminated by me in writing.

The best way to contact or to leave messages for me:

Check here:

- My Home
 My Work
 My Cell
 Other

If unable to reach me:

Check here:

- You may leave a detailed message
 Please leave a message asking me to return your call
 Other: _____

Patient Signature: _____

Date: _____