

Patient Financial Profile

Brewer Chiropractic Clinic
702 IH 20W, Suite 100
Arlington, TX 76017
(817) 467-2010

Personal Injury

Brewer Chiropractic Clinic is happy to accept your personal injury coverage, as soon as your exact coverage is verified by the responsible party. We will file the claim forms and assist you in every way we can.

Office Policy Regarding Personal Injury Protection or Med Pay

☐ _____ I was injured in a motor vehicle accident and this claim is being submitted through my automobile insurance company. In the event this claim is rejected by my insurance company, I understand that I am liable for full payment of services rendered.

☐ _____ I request that my automobile insurance company make the check(s) for billed services, payable to: **Brewer Chiropractic Clinic**

Insurance Information:

Name Claim Number Date of Accident

Address City State Zip Code

Claim Adjuster Telephone Fax

Signature

If you understand and agree with the statements that are checked above, initial the lines next to the checked boxes and sign the form here.

Print Full Name Signature Date