

PATIENT INFORMATION

PLEASE PRINT CLEARLY

LAST NAME	FIRST	M.I.
HOME STREET ADDRESS		
CITY, STATE, ZIP CODE		
WORK STREET ADDRESS		
CITY, STATE, ZIP CODE		
HOME PHONE		
MOBILE PHONE		
WORK PHONE		
E-MAIL ADDRESS		
DATE OF BIRTH	YOUR AGE:	
OCCUPATION	MARITAL STATUS:	
HOW DID YOU HEAR ABOUT US?		
EMERGENCY CONTACT	PHONE:	
ARE YOU A BRILLIANT DISTINCTIONS MEMBER?	<input type="checkbox"/> YES, Membership No: _____ <input type="checkbox"/> NO	
WHICH TREATMENT ARE YOU HERE FOR TODAY?	<input type="checkbox"/> Botox <input type="checkbox"/> Cheek Augmentation <input type="checkbox"/> Lip Augmentation <input type="checkbox"/> Nasolabial Folds Correction <input type="checkbox"/> Smoker's Lines <input type="checkbox"/> Fine Lines on Cheeks <input type="checkbox"/> Deep Lines on Forehead	
PLEASE ALSO CHECK FUTURE INTERESTS	<input type="checkbox"/> Deep Lines in Frown Area <input type="checkbox"/> Deep Crow's Feet Lines <input type="checkbox"/> Vi Peel Chemical Peel <input type="checkbox"/> Kybella Treatment <input type="checkbox"/> Sunken Temples <input type="checkbox"/> Neck Lift with Fillers <input type="checkbox"/> SculpSure for Fat Reduction	

CANCELLATION POLICY

Our office works hard to make our services available to as many patients as possible. We require that you inform us 2 business days in advance of any changes in your scheduled appointment. If you do not show up for your appointment, you shall be charged One Hundred Dollars (\$100).

COLLECTION AGENCY POLICY

Should we require the services of a collection agency or a lawyer to collect the monies owed us, you agree to pay for the cost of collecting your dues and any other expenses incurred in full. By my signature, I acknowledge full understanding and agreement to the CANCELLATION and COLLECTION AGENCY POLICIES.

CREDIT CARD INQUIRIES

In the event your credit card company requests or Dr Romero needs to submit copies of your medical records to explain a charge, your signature below authorizes the release of your medical records.

Signature: _____

Date: ____/____/2019