AmeriPharma
A Harper's Pharmacy Company

132 S Anita Dr., Orange, CA 92868
Phone# (877) 778-3773 Fax# (800) 951-7948

FACILITY RESIDENT INFORMATION FORM

Resident Name ______________________ Apartment/Room# __________

Social Security# __________ D.O.B. __________ Medicare# __________ Medicaid# __________

Facility Name __________ Administrator __________ Ph# __________ Fax# __________

Allergies ______________________

Diagnoses ______________________

Medication Storage ☐ Apartment/Room ☐ Central Storage

Special Requests ______________________

____

Received By ______________________ Date __________

FINANCIAL RESPONSIBLE PARTY

Name __________ Relation to Resident __________ Telephone/Cell __________

Address ______________________ City / State / Zip __________

EMERGENCY CONTACT(S)

Name __________ Relation to Resident __________ Telephone/Cell __________

Address ______________________ City / State / Zip __________

Name __________ Relation to Resident __________ Telephone/Cell __________

Address ______________________ City / State / Zip __________

PRIMARY CARE PROVIDERS

Medical Dr's Name __________ Phone / Fax / Pager __________

Psychiatrist Name __________ Phone / Fax / Pager __________

Other Emergency Information ______________________

PLEASE PROVIDE A COPY OF ALL KNOWN INSURANCE CARDS IN THE SPACE PROVIDED BELOW