

Practice: Arizona Allergy Associates
Address: 705 S. Dobson Road, Chandler, AZ 85224
Privacy Official: Pam Drozdowski
Telephone: 480-897-6992

Notice of Privacy Practices Receipt

I acknowledge that I was provided with the Notice of Privacy Practices of the Medical Practice named at the top of this page.

Print Name of Patient: _____

Signature of Patient: _____

Date: _____

Patient's Date of Birth: _____

Patient's ID/ Chart Number: _____

For Personal Representative of the Patient (if applicable)

Print Name of Personal Representative: _____

Describe Personal Representative
Relationship (Parent, guardian, etc): _____

Signature of Personal Representative: _____

Date: _____

For Practice Use Only:

Signature of Practice Employee

Date