

Dr Hester van der Walt

Pediater Kinderarts Paediatrician

Kantoor Inligting

Leernommer:.....



Inligting van Verantwoordelike Persoon en Pasiënt/ Information of Responsible Person and Patient

Inligting van hooflid/persoon verantwoordelik vir betaling van rekening

Information of main member/person responsible for account

Hooflid of verantwoordelike persoon/
Main member or responsible person

Voornaam(name)/Name(s):

Van/Surname:

RSA Identiteitsnommer/RSA Identity number:

If foreign citizen name citizenship and provide passport number:

Posadres/Postal address :

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Poskode/Postal code:

Sel nommer(s)/Cellular telephone number(s): **Ma/Mother:**

Sel nommer(s)/Cellular telephone number(s): **Pa/Father:**

Huis telefoonnommer/Home telephone number:

Werk telefoonnommer/Work telephone number:

E-pos/E-mail: @

Inligting van afhanklike (pasient)/Dependant (patient) information

Pasient/Patient

Name (soos op mediese fonds kaart)/Names (as on medical aid card):

Van (soos op mediese fonds kaart)/Surname (as on medical aid card):

Geboortedatum/Date of birth:

RSA Identiteitsnommer/RSA Identity number:

Afhanklike se kodenommer op mediese fonds kaart/Code number on medical aid card:

Vir elke kind (pasient) moet 'n aparte vorm ingevul word/ A separate form must be completed for each child (patient)

Mediese fonds inligting/Information about medical aid

Authorization/
Magtiging

Naam van mediese fonds skema/Medical aid name:

Mediese fonds plan of kategorie/Name of medical aid plan or category:

Mediese fonds nommer/Medical aid number:

Magtigingsnommer vir spesialisbesoek/Authorization for specialist consultation:

(Verkrygbaar by mediese fonds/Obtainable through medical aid)

Verwysende geneesheer of huisarts/Referring doctor or family doctor:

Naam & telefoonnommer/Name & telephone number:

EK, DIE ONDERGETEKENDE, ERKEN HIERMEE DAT DIE VEREFFENING VAN DIE REKENING MY VERANTWOORDELIKHEID IS/
I, THE UNDER-SIGNED, HERewith ACKNOWLEDGE THAT THE SETTLEMENT OF THE ACCOUNT REMAINS MY RESPONSIBILITY

Jou Naam/Your Name:

Datum/Date:

Jou Handtekening/Your Signature:

Baie dankie!
Thank you very much!