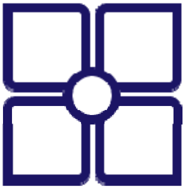

CROSSROADS COUNSELING & CONSULTING ASSOCIATES, PC

Psychiatry, Mental Health and breakthrough TMS Treatment

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McMurray, PA 15317
Telephone: (724) 942-3996
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www.cccapgh.com

☐ 1000 Commerce Drive, Suite 1002
Moon Township, PA 15108
Telephone: (412) 264-2155
Fax: (412) 264-1815
www.cccapgh.com

NEW CLIENT INTAKE FORM

Date: ____/____/____ Practitioner: ____________ First Appt.: ____________

Name: ____________ DOB: ____________

Address: ____________ City: ____________

State: ____________ Zip: ____________ Cell Phone: ____________

Home Phone: ____________ OK to call? ☐ Yes ☐ No

Work Phone: ____________ Ext. ________ OK to call? ☐ Yes ☐ No

SSN: ____________ Gender: ☐ Male ☐ Female Referred By: ____________

Email: ____________ OK to use? ☐ Yes ☐ No

Reason for Appointment: ____________

INSURANCE INFORMATION

Primary	Secondary
Name: ____________	Name: ____________
ID #: ____________	ID #: ____________
Group #: ________ Copay: ________	Group #: ________ Copay: ________
Deduct.: ________ Coins.: ________	Deduct.: ________ Coins.: ________
Visit limit: ______ Auth. Required? Yes ☐ No ☐	Visit limit: ______ Auth. Required? Yes ☐ No ☐
Phone: ____________	Phone: ____________

SUBSCRIBER INFORMATION

Are you the subscriber? ☐ Yes ☐ No if No please complete below

Subscriber Name: ____________ DOB: ____________

Relationship: ____________ Address: ☐ same as Pt ☐ Different *(please complete below)*

Address: ____________ City: ____________

State: ____________ Zip: ____________ Cell Phone: ____________

Phone: ____________ Employer: ____________

Benefit Information: ____________

____