

# My Kid's Chart Registration

(please print clearly)

Email address: \_\_\_\_\_

**Parent** first name: \_\_\_\_\_

**Parent** last name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Patients** to add to account:

| Name | Date of Birth |
|------|---------------|
|      |               |
|      |               |
|      |               |
|      |               |
|      |               |

Once your account is created, you will receive an email with a temporary password that is active for 1 week. You will need to sign into the portal in order to complete your account setup. Be sure to verify that your name appears correctly and that the names of the patients you have requested access to appear on the screen.

Please be aware that when a patient turns 14 years old in the State of Washington, by law, the record for that patient automatically becomes private. After the patient is 14 years old, he or she may grant permission to a parent or guardian to have access to the chart by completing and signing a release form. This permission can be revoked at any time at the request of the patient or at the discretion of the physician.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

THIS FORM CAN BE FAXED TO 206-368-6088 IF COMPLETED OUTSIDE OF THE OFFICE

*For office use only*

|                        |  |
|------------------------|--|
| Date account requested |  |
| Date account set-up    |  |
| Initials               |  |
| Temporary Password     |  |

