

UCA Speech-Language-Hearing Center

Registration Form for **FALL of 2023**

Please return this information to your clinician or to Amanda Rehm via email, fax, or mail. Once this information is received, the SLHC will contact you via EMAIL regarding possible options for scheduling.

Slots are assigned on a first-come-first-serve basis according to the return date of registration form.

Email: arehm@uca.edu Fax: 501-504-2105 Mail: 201 Donaghey, UCA Box 4985, Conway, AR 72035

IMPORTANT DATES

August 30, 2023	First day of therapy if scheduled for M/W
August 31, 2023	First day of therapy if scheduled for T/TH
September 4, 2023	HOLIDAY; SLHC is closed; No therapy.
October 19, 2023	FALL BREAK; SLHC is closed; No therapy.
November 22-23, 2023	THANKSGIVING BREAK; SLHC is closed; No therapy.
November 29, 2023	Last day of therapy if scheduled for M/W
November 30, 2023	Last day of therapy if scheduled for T/TH

Patient Information

First Name: _____ Last Name: _____ Middle Initial: _____

Date of Birth: _____ Sex: Male Female

Home Number: _____ Cell Number: _____ Work Number: _____

Preferred Language: _____ Race: African American Asian Caucasian Hispanic Native American Other

Ethnicity: Hispanic Non-Hispanic Email Address (required): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Please complete scheduling preferences on the back of this form.

If Patient is a Minor

Father's Full Name: _____ Date of Birth: _____

Mailing Address: _____

Cell Phone: _____

Mother's Full Name _____ Date of Birth: _____

Mailing Address: _____

Cell Phone: _____

Scheduling Preferences (Please choose your preferred day/time for therapy.)

Please choose your most preferred day/time. Pay close attention to the times offered below as some times are unavailable due to course schedules. The UCA SLHC will do our best to accommodate your needs on a first-come, first-serve basis according to date of registration return. We will contact you via phone if we are unable to meet your first request.

I prefer scheduling for:

<input type="checkbox"/> M/W mornings 9-12
<input type="checkbox"/> M/W afternoons 1-6

Time preferred:

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Time preferred:

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<input type="checkbox"/> T/TH mornings 9-12
<input type="checkbox"/> T/TH afternoons 4-6

Time preferred:

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Time preferred:

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Billing

We currently are self-pay only. You will be billed directly from the UCA SLHC on a monthly basis. Payment due date will be listed on the invoice. Balances for each semester must be paid in full prior to registration for the next semester.

Please see Amanda Rehm to discuss payment options and methods.

Thank you for choosing the UCA SLHC! We look forward to working with you.