

Karren J Garrity, MS, LPC, NCC
Therapist
Individual and Family Therapy
info@GarrityLPC.net

Tel: 860.927.1464

Fax: 844.889.8688

Client Information

Name _____

Address _____

Date of Birth _____

Parent Contact Information

Name _____

Address _____

Tele _____ email _____

Insurance information

Name of Insurance Company _____

Address _____

Phone number _____

Policy # _____ Group # _____

Name of policy holder _____

Address of policy holder _____

Date of Birth of policy holder _____

Relation of policy holder to client _____