MOUNTAIN AUDIOLOGY
HEAR. BETTER. ALWAYS.

Making hearing care part of primary care for over 30 years

Clyde Office -
61 Haywood Park Drive, Suite B
Clyde, North Carolina 28721
828-627-1950

Franklin Office -
175 East Main Street Suite F
Franklin, NC 28734
828-634-1710

Release of Information / Medical Records

I,_____(_____), **authorize**
Patient Name **Birth date**

the release of my audiology test results
Desired Health Information

from:

Mountain Audiology
Practice Name

175 East Main Street Suit F, Franklin, NC, 28734
Practice Address

to be released to:

_____
Practice Name

_____
Practice Address

This authorization expires one year from the date below. This authorization may be revoked in writing at my request. I understand charges for duplicating my records may be incurred.

_____ Date:_____
Signature of patient/parent/guardian

_____
Patient's Address

Witnessed by: _____

Date: _____

Main Fax 828-627-1070