SYDNEY
SPINE INSTITUTE

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Request for Access to Health Records

Please note applications for access to health records may take up to **45 calendar days** to be processed. If your matter is urgent, please contact us on **02 9715 5007** to discuss your circumstances.

Applicant Details

The applicant is the person to whom the health information pertains.

First name *

Last name *

Date of birth * (DD/MM/YYYY)

Phone number *

Street address *

Suburb *

State *

Postcode *

Email address * (for receiving records)

Records Requested

- [ ] Consultation report
- [ ] Other

Please provide details of the record(s) you are requesting *

Declaration and Signature

Please sign using Adobe Acrobat Reader's Fill & Sign tool, or print and sign by hand.

Applicant full name *

Date signed

Applicant signature *