



EMC Express Care, 8245 Precinct Line Rd Ste 100 N. Richland Hills, TX 76182
Phone: 817-503-8800 Fax: 817-503-8801 billingmanageremc@gmail.com
Open 10am to 8pm every day

EMPLOYEE CARE PLAN REGISTRATION 3/16/18 jl

Company name: _____

Mailing address: _____

City: _____ State: TX Zip: _____

Phone: _____ Fax: _____

*Contact name: _____ Title: _____
(Owner/Human Resources/Office Mgr)

*Contact name: _____ Title: _____
(Owner/Human Resources/Office Mgr)

Direct phone and extension: _____

Email: _____

We request urine drug screen (\$25) for all injuries: Yes / No

*Signature: _____ Date: _____

*Printed Name: _____

*Authorized by company to send employees for treatment and responsible for getting invoices paid within 30 days.