



NEW HORIZON FAMILY HEALTH SERVICES, INC
130 MALLARD STREET
GREENVILLE, SC 29601

TO COMPLETE REGISTRATION, YOU MUST BRING THE FOLLOWING:

1. Proof of Identity

- Adults: Drivers License or Other Picture Identification

- Children: Birth Certificate
School Record or School ID Card
Nursery or Daycare Record

2. Social Security Card

3. Immunization Records (Ages 0-18)

4. Proof of Coverage

- Current Medicaid Card (if applicable)
- Current Insurance Card (if applicable)
- Current Insurance Card (if applicable)

5. If Applying for Sliding Fee Discount:

- Tax Return (from last year)
- Proof of Household Income: Three Most Recent Paycheck Stubs

PLEASE NOTE:

- YOU MUST PROVIDE PROOF OF IDENTITY AND PROOF OF INCOME TO BE CERTIFIED FOR SLIDING FEE.

- ANNUAL RECERTIFICATION IS REQUIRED.

**YOUR VISIT MAY BE DELAYED UNTIL THE
REQUIRED INFORMATION IS PROVIDED.
YOU WILL BE FINANCIALLY RESPONSIBLE
FOR FULL CHARGES.**

NO FREE SERVICES, NO EXCEPTIONS.