

Apothecary Pharmacy
Medical Services
University of Colorado Boulder
Boulder, CO 80309-0119
303-492-8553

New User Information Form

Name *(Last, First, Middle Initial)*

Date of Birth

Gender

Local Address *(Street, City, State, ZIP)*

Home / Permanent Address *(Street, City, State, ZIP)*

Best Phone Number

Opt into text alerts?

Student ID Number (if a student)

Yes

No

Prescription Insurance Coverage *(Campus Care does not cover prescriptions)*

Student Gold Health Insurance

parent's plan

employer plan

personal plan

I don't have prescription insurance coverage

If you have any drug allergies, please list the medication and the type of reaction.

Please return this completed form to apothecary@colorado.edu or fax to 303-492-4874 along with a copy of both the front AND back of your prescription insurance card.