

## Client Portal New User Form

Please complete this form and sign below for employees/physicians to be given a user name and password for LigoLab Client Portal. [LIGO Connect](#)

Client Name: \_\_\_\_\_

Client Address: \_\_\_\_\_

Client Phone Number: \_\_\_\_\_

Last Name	First Name	E-Mail Address

Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Email the completed form to: [krodriguezaparicio@sbmf.org](mailto:krodriguezaparicio@sbmf.org)