



Oregon POLST Registry Demographics Form

POLST forms older than August 2008 must include additional identifying information in order to be added to the Registry. Please complete the information below and fax or mail it with a copy of *both* sides of the POLST form.

Please provide the following required information:

(Last Name/First/Middle Initial)

(Date of Birth)

Please provide all or part of the following information:

(Address)

(City, State, Zip Code)

Gender (check one): ___ (Male) ___ (Female)

Last 4 numbers of your Social Security number: _____

Updating Demographics Information:

Check box for updates only. Please fax or mail completed demographics form only.

Demographics update. POLST form previously submitted to Registry.

Oregon POLST Registry
 Mail Code: CDW-EM
 3181 SW Sam Jackson Park Rd
 Portland, OR 97239
 Phone: 503-418-4083
 Fax: 503-418-2161
 Email: polstreg@ohsu.edu