



2007 95<sup>th</sup> Street, LL-A  
Naperville, IL 60564  
630-848-1700  
630-848-1718

## REGISTRATION REQUEST FOR MY KID'S CHART

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Email address: \_\_\_\_\_

First name: \_\_\_\_\_

Last name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Patients to add to account:

Name	Date of Birth

**Once your account is created, you will receive an email with a temporary password that is active for 1 week.** You will need to sign into the portal in order to complete your account set-up. Be sure to verify that your name appears correctly and that the names of the patients you have requested access to appear on the screen.

Please be aware that when a patient turns 18, the record for that patient automatically becomes **private**. After the patient is 18, he or she may grant permission to a parent or guardian to have access to the chart by completing and signing a release form. This permission can be revoked at any time at the request of the patient or at the discretion of the physician. The patient may register their own email with My Kids Chart in order to have direct access to their records.

Signature \_\_\_\_\_

Date \_\_\_\_\_

I hereby avow that I am the authorized legal guardian for the aforementioned patients and give permission for Children's Health Partners, SC to enroll them in the patient portal.