Billings Clinic

A Simple, Sensible Way to Bridge the Gaps in Your Medical Insurance Coverage.

FIRSTCARE℠ CREDIT

When you, or someone you love needs medical treatment, you have enough worries- Worrying about how to pay for treatment shouldn't be one of them.

FirstCare℠ Credit takes the financial worry out of your family's medical treatment by making unpredictable, out-of-pocket medical expenses manageable.

Billings Clinic, in cooperation with First Interstate Bank, offers FirstCare℠ Credit, the smart way to manage unforeseen medical expenses.

FirstCare℠ Credit is convenient. All of your Billings Clinic charges can be consolidated into a single account with easy monthly payments, extended terms and a sensible payment schedule.

APPLICATION INFORMATION

Name (First, Middle, Last)	Social Security Number	Home Phone	Mother's Maiden Name	
Physical Address	City	State	Zip	Years There
Mailing Address (if different)	City	State	Zip	
Employer	Position		Work Phone	
Employer's Address (Street)	City	State	Zip	Years There
Patient's Name if Different than Borrower	Birthdate of Borrower		Relation to Borrower	

FINANCIAL INFORMATION

Household:

Gross Monthly Income:	
Net Monthly Income:	
Other (Net Monthly): 1	
Other (Net Monthly): 2	

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FINANCIAL INFORMATION (continued)

Have you ever been a debtor in a bankruptcy proceeding? Yes ☐ No ☐

Household:

BANK LOANS, CREDIT CARDS, OTHER	BALANCE OWING	MONTHLY PAYMENT
REAL ESTATE MORTGAGES		
VEHICLE LOANS		

Mortgage Holder or Landlord Name and Address:

Monthly Rent/Mortgage Payment

Everything that I have stated in this application is correct to the best of my knowledge, and I agree to notify you of any changes. I authorize an investigation of my credit, including the receipt of customer reports from a consumer-reporting agency.

Applicant's Signature _____ Date _____