



# VIVA HEALTH

If you would like more information about how to join VIVA Health's Provider Network, please call Bill Howerton at (205) 558-7539 or complete the form below and fax to (205) 449-7572.

**LAST NAME** \_\_\_\_\_

**FIRST NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY/STATE/ZIP** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**SPECIALTY** \_\_\_\_\_

**HOSPITAL ADMITTING PRIVILEGES (IF APPLICABLE)**

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