



ACU Prescription Services

Provided by James McCoy's Drug Store
839 N. Judge Ely Blvd, Abilene, TX 79601
(325) 677-2300 Fax (325) 677-6800



Check the Following Free Delivery to the ACU Medical Clinic * Patient Will Pick Up at the Pharmacy
 Bill Medications to ACU Medical Clinic

Student Name : _____ Date of Birth : _____

Permanent Street Address : _____

City : _____ State : _____ Zip: _____

Student Phone Number (with Area Code) : _____ Med Allergies: _____

Check here to authorize the pharmacy to contact a parent/guardian regarding insurance and other items specific to the particular prescription.

Parent/Guardian Name : _____ Parent Phone : _____

PRESCRIPTION Insurance Information (Note this may be a different card than medical insurance) :

Insurance Company Name : _____ ID# _____

BIN # _____ PCN # _____ RxGroup # _____

Credit Card Information (For On Campus Delivery Services Only)

Credit Card Number : _____ Exp Date : _____

Security Code : _____ Card Type: _____ Name on Card : _____

Previous Pharmacy Information

Pharmacy Name : _____ Pharmacy Phone : _____

Pharmacy City : _____ State : _____

I understand that ACU is merely offering this delivery service as a help to me and will provide this form to James McCoy's Drug store, which is the pharmacy responsible for filling my prescription. Based on ACU's limited role, I agree to release and hold ACU harmless from any liability relating to this service. I have received James McCoy's Drug Store Notice of Privacy Practices and HIPAA compliance and authorize James McCoy's Drug Store to charge my credit card for prescriptions.

Student Signature : _____ Date : _____

Parent/Guardian Signature (if applicable): _____ Date : _____

* Deliveries generally occur after 1 pm. If the prescription is called in to us before noon, we will do our very best to deliver that same afternoon. Prescriptions called in after noon will generally be delivered the following day.