Clinch River Health Services

Parental Authorization for Minors Seeking Medical Treatment

It is the policy of Clinch River Health Services to comply with state and federal laws that govern the treatment of children under the age of 18. Under this law, it is necessary to have the presence of a parent or legal guardian or a signed document giving consent before evaluation and/or treatment can be rendered to children under the age of 18.

I/We request and authorize Clinch River Health Services and its personnel to provide medical care services to:

Childs Name:_____ Date of Birth:_____

If your child is over the age of 16, do we have your permission to treat them if they come alone to any appointment? YES NO

List any individuals, other than the legal guardians, whom have permission to bring your child in for medical treatment during your absence.

Name: _____ Relationship:_____

Name: _____ Relationship:_____

Name: _____ Relationship:_____

Name: _____ Relationship:_____

Name: _____ Relationship:_____

Is there custody/guardianship orders for this minor child? **If YES, please provide a copy of the legal document**. YES NO

_____ _____ _____

Signature of Parent/Legal Guardian Printed Name Relationship

_____ _____

Phone Number: Date