



Family Medical Care

Family Medical Care
10625 N Military Trail, Suite 102
Palm Beach Gardens, FL 33410
PH: 561-249-7626 Fax: 561-429-7713

Permission to Treat

I (We) _____
print name(s) of legal guardian(s)

I (We) _____
print name(s) of legal guardian(s)

authorize Family Medical Care of the Palm Beaches and its personnel to deliver medical services to my child(ren):

authorize the following people to bring my child in for treatment

print child's name and date of birth

Name: _____ Relationship: _____

print child's name and date of birth

Name: _____ Relationship: _____

print child's name and date of birth

Name: _____ Relationship: _____

print child's name and date of birth

Name: _____ Relationship: _____

print child's name and date of birth

Name: _____ Relationship: _____

Signature of Legal Guardian

Date

Relationship to patient