



**HYLAND FAMILY CHIROPRACTIC**

*"Achieving Wellness Naturally"*

7 East Ave., Monroe, OH 45050 513-360-2930

[www.HylandFamilyChiro.com](http://www.HylandFamilyChiro.com)

## **MINOR CONSENT FORM**

I, \_\_\_\_\_ authorize Hyland Family Chiropractic  
Doctors and staff to render care for

my minor child, \_\_\_\_\_.

\_\_\_\_\_  
Parent / guardian signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witnessed