

BOARDMAN FAMILY CHIROPRACTIC, P.C.
4232 E. Chandler Blvd., Ste 20
Phoenix, AZ 85048
480-704-1954

Consent to Care for a Minor Child

I hereby authorize, Dr. John Boardman, and whomever he may designate as assistants to administer chiropractic care, as he deems necessary to my child/minor/ward.

Name of Minor Patient

Signature of Parent/Guardian

Signature of Witness