



TLC Pediatrics of Frisco

11700 Teel Pkwy Suite 200

Frisco TX 75033

214-618-6272; Fax 214-618-6277

Permission to Treat Patients 16 years old through 18 years old without Parent/Legal Guardian

TLC Pediatrics of Frisco must receive permission, from a child's parent or legal guardian, prior to providing treatment(s) for preventative care, injury or illness that is non-life threatening. This form provides the legal permission to treat your adolescent child without an adult present.

Patient's Name _____ Patient's DOB: _____

This form is specific to patients who are **at least 16, but not 18 years old**. In addition to giving permission to TLC Pediatrics of Frisco to assess and treat the aforementioned minor without an adult present, I also agree to be financially responsible for payment of all charges in connection with the care and treatment rendered.

This authorization is valid until otherwise revoked or until date listed _____.

Please Note: Insurance card(s) and co-pay amounts (if applicable) must be presented at each visit.

Authorized by:

_____ Date: _____

(Parent/Legal guardian signature)

(Printed name of Parent/Legal Guardian)

Emergency contact telephone number

NOTE: Annotated Code of (State Law) allows for the following exceptions, where a minor has the same capacity as an adult to consent to medical treatment: 1) Treatment for and/or advice about drug abuse, alcoholism, venereal disease, or pregnancy other than sterilization. 2) Physical exam for and treatment of injuries and/or collection of evidence from an alleged rape or sexual offense. 3) Consultation, diagnosis and treatment of a mental or emotional disorder.