

Heritage

Obstetrics and Gynecology, P.C.

Clayton L. Cox, M.D., FACOG
Stephen L. Little, M.D., FACOG
D. Holt Harrison, M.D., FACOG
Francis T. Lake, Jr., M.D.

668 Lanier Park Drive
Gainesville, Georgia 30505
Phone (770) 531-1515
Fax (770) 538-0517

CONSENT FORM FOR TREATMENT OF A MINOR

DATE: _____

PATIENT NAME: _____ D.O.B. _____

DATE OF VISIT: _____

PARENTS NAME AND ADDRESS: _____

CONTACT NUMBER FOR PARENT _____

I HEREBY GIVE DR.'S COX, LITTLE, HARRISON OR LAKE PERMISSION TO EXAMINE
MY DAUGHTER WHOSE NAME IS LISTED ABOVE.

SIGNATURE OF PARENT: _____

OFFICE STAFF WITNESS: _____