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Lynn Gulley, M.D.
Mary Valentine Fleming, M.D.
Genevieve Carnero, M.D.
Terri Joliet, M.D.
Heather Pondinas, A.P.R.N.
Whitney Lyon, A.P.R.N.

We realize that Parents or Legal Guardians may not always be able to personally bring their child to the office themselves. However, Indiana Law dictates that a patient under the age of 18 CANNOT be treated without a Parent or Legal Guardian present. If your child has an on-going medical condition or is on daily medications, we do require a parent or legal guardian to be present anytime your child has a check-up appointment. If a Parent or Legal Guardian can not be present, then anyone authorized on the following form can accompany the child and give consent for treatment and or immunizations. This form MUST be completed by a Parent or legal Guardian.

I, _____, the Parent or Legal Guardian
of _____, give consent for the
(child's name)
following people to have my child treated by Drs. Gulley, Fleming, Joliet, Carnero,
Pondinas, A.P.R.N. and Lyon, A.P.R.N. & staff;

Authorized People	Relationship to Patient
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Signature: _____ Date: _____

Please note that in the case of a divorce, we ask that you bring a copy of your court settlement papers to establish parental rights.