



EYE SPECIALISTS • 1103 Galvin Road South • Bellevue, NE 68005 • (402) 292-6514
□ HAROLD R. BARES, M.D. □ THOMAS W. GRANGE, O.D. □ PATRICIA L. REED, O.D.
□ ARIANN K. BROWN, O.D. □ MICHAEL A. CHATTERSON, O.D.

Parent/Guardian consent to treat a minor

I hereby authorize Eye Specialists and whomever they deem necessary to administer treatment to (child)_____

Dated in Bellevue, Nebraska this ____ day of _____, 20_____

Printed Name Parent/Guardian_____

Signature of Parent/Guardian_____