

9111 Monroe Road Suite 100
Charlotte, NC 28270
P: 704-847-3911
F: 704-847-2033



Consent for social media: photos for website, use in clinic or for educational purposes:

Date: _____

Regarding: _____

Address: _____

I hereby authorize the use of my child's photos on the website, clinic or for educational purposes.

Parent Signature: _____ Date: _____

Witness Signature: _____ Date: _____