

OC Chiro

Russell D. Reese, D.C.

16152 Beach Blvd # 179

Huntington beach, CA 92647

714-895-9355 Fax 714-276-2216

Tax ID# 564-49-5612 NPI # 1992815310

**CONSENT TO TREAT A MINOR**

*I / We, the undersigned parent(s) and/or guardian(s) of \_\_\_\_\_  
a minor, do hereby authorize this office and its doctors to administer Chiropractic care to my  
child, as they deem necessary.*

\_\_\_\_\_  
*Parent or legal guardians name (please print)*

\_\_\_\_\_  
*Parent or legal guardian's signature*

\_\_\_\_\_  
*Witness's signature*

\_\_\_\_\_  
*Date*