SCHULTE CHIROPRACTIC

A Wellness Way Affiliate

Schulte Chiropractic Wellness Center

1777 N 86th St Ste 102, Lincoln, NE 68505

PH: (402) 420-0024 | lincoln@twwclinics.com

www.thewellnesswayclinics.com

CONSENT TO TREAT MINOR CHILDREN
Please print all information

I, _____, parent or legal guardian of _____, born _____, do hereby consent to any chiropractic care determined by Dr.Stan Schulte to be necessary for the welfare of my child.
This authorization is effective 7-20-18.
Signature of Parent or Legal Guardian

_____
Print Name

_____
Signature

_____
Witness Signature