
John C. Homan D.C.

Stephanie A. Bechtol D.C.



913 West Logan Street
Celina, Ohio 45822
P 419-586-8600 | F 419-586-7881

CONSENT FOR MINOR TREATMENT

I give permission for my SON / DAUGHTER,

To received treatment from Dr. Homan / Dr. Bechtol until age 18.

Guardian Name:

Guardian Signature:

Date:
