

Consent form for diagnosis and possible treatment Team Child and Family

(for patients under 16 years old)
(a consent form must be completed for each child)

Data child

First name and last name	
Address	
Postal code / place of residence	
Date of birth	
BSN number	

Data parent(s)/caregiver(s):

If a child under the age of 16 is registered with ARQ Centrum'45, all legal representatives of the child must give permission for this.

First and last name parent 1:	
Initials:	
Does parent 1 have authority over the patient?:	<input type="checkbox"/> Yes / <input type="checkbox"/> No
Address parent 1:	
Postal code / place of residence parent 1:	
(Mobile) telephone number parent 1:	
Email address parent 1:	
Patient lives with parent 1:	<input type="checkbox"/> Yes / <input type="checkbox"/> No
First and last name parent 2:	
Initials:	
Does parent 2 have authority over the patient?:	<input type="checkbox"/> Yes / <input type="checkbox"/> No
Address parent 2:	
Postal code / place of residence parent 2:	
(Mobile) telephone number parent 2:	
Email address parent 2:	
Patient lives with parent 2:	<input type="checkbox"/> Yes / <input type="checkbox"/> No

Is there a divorce and/or co-parenting situation?	
For a child over 16 years old: are parents aware of the registration?	<input type="checkbox"/> Yes / <input type="checkbox"/> No

Other persons involved; caregiver/guardian

Relationship to patient:	
Name:	
Address:	
Postal code / place of residence:	
(Mobile) telephone number	
Email address:	
Does the person involved have authority over the patient?	<input type="checkbox"/> Yes / <input type="checkbox"/> No

By signing this form, the legal representatives confirm that they agree with diagnostic testing and/or treatment (if indicated) within ARQ Centrum'45. Adolescents aged 12 or older must also agree to the registration.

Authoritative parent/caregiver/guardian:

Authoritative parent/caregiver/guardian:

Contact details

Name:

Name:

Signature:

Signature:

Date:

Date:

Signature adolescent (12 years or older)

Name:

Signature:

Date: