



Guarantor Form

All patients under 18 years old are required to have a guarantor for payment, unless the patient has been emancipated and is considered by the court to be an adult.

Please note, the patient's account **will need to be current in order for the patient to be seen**. If the guarantor will not be present with the child at appointments, please ensure that the patient arrives with the proper payment method in order to satisfy any amounts due at the time of visit, or consider adding a payment plan to the patient's account. You can also remit payment online, by phone, or by mail.

Please fill out below to indicate who is responsible for payment for the minor.

Patient Information

Patient Name: _____ DOB: _____

Guarantor Information

Guarantor Name: _____ DOB: _____

Guarantor Address: _____

City/State/Zip: _____

Guarantor Ph #: _____

Signature: _____

Date: _____