

# YELLOW CREEK CHIROPRACTIC

Dr. April S. Zink

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835 N. Cleveland Massillon Road Akron, Ohio 44333  
P: 330-848-9334 F: 330-848-9332

**HIPAA Privacy Act:** I have read the HIPAA Privacy Notice for Yellow Creek Chiropractic. I have been made aware of my rights and all laws and regulations in accordance to the HIPAA guidelines. I acknowledge receipt of the Privacy Notice.

Initial: \_\_\_\_\_

**Cancellation Policy:** Yellow Creek Chiropractic requires all patients to give a 24 hour notice when cancelling an appointment, emergencies excluded. Any patient who does not call to cancel or does not show up for their scheduled appointment will be charged a fee of \$15.00 per missed appointment. This fee will be the responsibility of the patient and must be paid before any further treatment will be performed. I agree to the cancellation policy.

Initial: \_\_\_\_\_

## Consent to Treat a Minor: Patient

Name: \_\_\_\_\_

As the parent or guardian of the above mentioned minor, I do hereby give consent and authorize Dr. Zink and staff to administer treatment as deemed advisable, necessary, or requested.

Initial: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date