

STANDARD OPTOMETRY
4153 El Camino Way Ste A
Palo Alto, CA 94306
Tel: (650)917-1342

Date:

Patient Name:

I give my permission to Dr. Lisa Lo, O.D. to treat my son/daughter without my presence. I understand I am responsible for providing any necessary information regarding insurance coverage, and I accept responsibility for any services and fees rendered that are not covered by insurance.

Signature

Relationship to Patient

Emergency Phone Number