## **Vision Plus**

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## <u>Parental / Guardian Consent</u> <u>For Eyecare for Minors</u>

In lieu of Florida Statute 1014 regarding Parental rights we are required to have you sign allowing us to provide products & services to your child / children.

I,(Name of Parent)	authorize Vision Plus to provide eyecare services and	
products to the minor child	(Name of Child)	)