



University of Houston-Downtown
Student Health Services

Gator Health Services
One Main Street, Suite S445
Houston, TX 77002-1001
Phone: (713) 221-8137 | Fax: (714) 223-7419

Authorization to Treat a Minor

I declare that I am the legal guardian and/or managing conservator of the above-named minor and grant permission to the University of Houston–Downtown Student Health Services to render medical or surgical tests or treatment as recommended.

I also grant permission to the University of Houston–Downtown Student Health Services to refer to another licensed physician or hospital for necessary emergency treatment.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required, but is given to provide authority and power to the University of Houston–Downtown Student Health Services staff to render necessary care in their best judgment.

I waive all claims to prior notification. It is understood that efforts will be made to contact the undersigned in the event of a major illness or injury, or if a Student Health Services clinician, nurse, or staff feels it is necessary.

I understand that I am financially responsible for any balance owed to Student Health Services and that payment is expected at the time services are rendered unless prior arrangements are made.

I hereby consent to the release of my medical records of the above-named minor for the purpose of Student Insurance billing (if applicable).