

Gurdon Public Schools Wellness Center Dental Services Parental Consent Form

870-353-5123 Ext. 122

Student Name: _____ DOB: _____

I understand that the following types of dental services are offered by Scott Byrd General Dentistry at the Gurdon Schools Wellness Center:

- Oral Hygiene Education
- Routine Dental Exams
- Dental Radiographs, Cleanings, and Sealants
- Fillings
- Extractions

ALL PRIMARY STUDENTS WILL BE TRANSPORTED to appointments to the Wellness Center at GHS by school staff in school vehicle.

YOUR INSURANCE WILL BE BILLED FOR SERVICES and a copayment may be required at time of service. If you need assistance with payment, please contact the Wellness Center.

By signing below, I am stating that I have read and understand the information provided above. I am granting my permission for Scott Byrd General Dentistry to provide dental services and education to the student named above at the Gurdon Wellness Center. If my child is a GPS student, I am granting my permission for the child to be transported by school vehicle to the Wellness Center located at GHS.

Parent/Guardian Name (Printed): _____

Parent/Guardian Signature: _____

Telephone Number: _____ Date: _____