

Moriarty Physical Therapy

301 Manchester Rd, Ste 101
Poughkeepsie NY 12603-2587
Phone: 845-454-4137

CONSENT FOR TREATMENT

I, the undersigned, hereby agree and give my consent to Moriarty Physical Therapy to administer such treatment and care as is prescribed and considered therapeutically necessary on the basis of findings during the course of treatment. I also authorize Moriarty Physical Therapy to furnish information to insurance carriers concerning this treatment and I hereby assign all payment for the services rendered. The information provided is accurate to the best of my knowledge.

Relationship to Patient:

Signed By

Date