

PARENTAL CONSENT FORM

Your child/children can get rides to their covered healthcare visits if they don't have any other way to get there. This is part of their Medicaid coverage. If your child needs to ride without a Parent or Legal Guardian present, you must fill out this Parental Consent Form. This form allows us to give rides to your 15 to 17 year old child/children without an adult riding along. Children under the age of 15 must always travel with an adult or guardian. You, the Parent or Legal Guardian of the child, must fill out, sign, and send us this form before we can set up rides for your 15 to 17 year old. Once you have filled out the form and signed it, you can send it to us by email, mail, or fax.

Child's First Name: _____

Child's Last Name: _____

Child's Medicaid Number: _____

My name is _____. I am the Parent or Legal Guardian of _____, who is age 15 to 17 years old.

I give Veyo permission to set up rides for, and provide rides to my son/daughter/minor dependent whose name I have written in this form. I understand these rides will carry my son/daughter/minor dependent to and from their covered healthcare visits. I further understand Veyo may set up and provide these rides when I am not able to ride along and no other adult is able to make the trip.

This Parental Consent Form goes into effect when I sign it. I understand it will stay in effect until I write to Veyo and ask that this agreement is canceled.

Print your name

How are you related to the child?

Your signature

Today's date

Please submit completed forms by email, mail, or fax:

Email: tripcoordinator@veyo.com

Fax: 480-757-6082

Mail: Veyo, Attn: Trip Coordinator
4875 Eastgate Mall, Suite 200
San Diego, CA 92009