

Chicken Soup: Pediatric In-Home Urgent Care Membership Agreement

This membership entitles me to six (6) in-home urgent care visits that are good for 12 months from the signing date below. The benefits included in this agreement are:

1. no additional fee for diagnostic testing or treatment included in the membership program.
2. No additional charge for other children in the home that are evaluated.

Service can be guaranteed after 5pm, 7 days per week. Any calls for service before 5pm are at the discretion of the physician who may not be immediately available.

By signing this form, I give Chicken Soup LLC permission to treat my child in my home for his/her acute problem. All treatment decisions will be discussed with the physician at the time of service. I recognize that not all medical problems are appropriate to be handled in the home. Illness and injury that are deemed to be more serious by the physician may be referred to the nearest hospital or emergency department.

Memberships are non-refundable and prices and rates are subject to change.

Printed Name _____

Signature _____

Date _____