

Q UALITY
L IVING
S ERVICES FOR SENIOR CITIZENS



Location:
4001 Danforth Road, S.W.
Atlanta, Georgia 30331

Mailing Address:
P. O. Box 311045
Atlanta, Georgia 30331

(404) 699-1686
FAX (404) 699-1687

MEDICAL CONSENT FORM

NAME: _____

ADDRESS: _____

CITY: _____ ZIP CODE: _____

TELEPHONE NUMBER: () _____

Quality Living Services, Inc. offers a Fitness Program wherein weights and aerobic activities are involved. The program does not provide for advanced stages of arthritis or other conditions where stability and balance are a problem.

- () Patient may participate in program.
- () Patient may not participate in program.

SPECIFIC CONCERNS/COMMENTS:

Physician's Signature

Date