Planned Parenthood
Arizona
ppaz.org
1.800.230.PLAN

PARENTAL CONSENT FOR MINORS

I, _____ attest that I am the lawful parent
(PRINT NAME OF PARENT)

or legal guardian of _____
(PRINT NAME OF PATIENT)

and herewith give my consent for her to have an induced abortion. I understand that the doctor and facility providing the abortion procedure are relying on this statement to fulfill their legal obligations under ARS 36 - 2152.

_____ Date: _____
Parent's Signature

NOTARY:

State of Arizona)
)
County of _____)

On this ____ day of _____, 20___, before me personally appeared (name of signer _____), whose identity was proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and who acknowledged that he/she signed the above/attached document.

(Seal) _____
Notary Public

IMPORTANT NOTE TO NOTARIES:

Pursuant to A.R.S. § 36-2152(A), notarized statements and journal entries associated with the statute requiring parental consent for abortion (A.R.S. § 36-2152) are confidential and are not public records. This statute is reproduced at page 35 of the Arizona Notary Public Reference Manual ("Notary Manual"). http://www.azsos.gov/business_services/notary/Notary_Public_Reference_Manual.pdf

In accord with this legal requirement, no document relating to this notarization may be disclosed in response to a public records request, and the contents of this document must be kept confidential. See page 18 of the Arizona Notary Manual, and http://www.azsos.gov/business_services/notary/notarynews.htm.

Violation of this confidentiality requirement is a criminal offense under A.R.S. § 38-504(B).

For office use only:

_____ _____
Received by Date

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