

## Sports Physical/Parental Permission/Information

Dear Parent/ Guardian (s):

Attached is the 2019-2020 Annual Pre-participation Physical Evaluation and 2019-2020 Annual Pre-participation Physical Examination form (*doctor to fill out page 4*). The Parent/Guardian must fill out pages 1-3). Parent/Guardian Signature is required on page 1 & 3. All completed forms should be returned to the Athletic Office or brought to Physicals with \$15 (Cash or Check) payment for the cost of the physical.

Student Name & ID

Physical #

Has permission to stay after school to receive his/or her pre-participation physical exam for the 2019-2020 school year to be conducted by Steward Orthopedics & Sports Medicine Center's Staff &/or affiliates.

\_\_\_\_\_  
Parent/Guardian Name (Print)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

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