SPORT:	Head Coach:
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		Athlete Health Record			
Athlete	Athlete Health Record	Page 2	Dhusisian Cianatura	Cuddon Couding Annot	Conquesion
<u>Athlete</u>	Page 1	Consent/Assumption of Risk	Physician Signature	Sudden Cardiac Arrest	Concussion
(first and last name)	(filled out emergency	(signed by parent and	(clearance for athletic	(signed by parent and	(initials AND signature
	Information section)	athlete)	participation)	athlete)	by parent & athlete)

SPORT:	Head Coach:				