

WARWICK YOUTH FOOTBALL & CHEERLEADING MEDICAL FORM

All football players and cheerleaders need a note or this form filled out from their own doctor to participate in the program. The completed **MEDICAL FORM** must be returned by no later than **AUGUST 1, 2019**.

ORANGE COUNTY YOUTH FOOTBALL & CHEERLEADING RULE: NO child will be allowed to practice without this form completed or a note from a doctor giving your child permission to practice football or cheerleading.

FOOTBALL PLAYER & CHEERLEADER INFORMATION

Name of Player: _____

Date of Birth: _____

Address: _____

Phone: _____

TO BE COMPLETED BY PHYSICIAN

Name of Physician: _____

Phone: _____

Allergies: _____

Physical or Emotional Concerns: _____

This child is in good health and may participate in football and cheerleading for the 2018 season.

Signature of Physician: _____ Date: _____

Physician Stamp: