



**Exercise
is Medicine®**
AMERICAN COLLEGE
of SPORTS MEDICINE®



EXERCISE IS MEDICINE | PHYSICIAN REFERRAL FORM

The guiding principles of Exercise is Medicine are shared by the American College of Sports Medicine (ACSM) and the American Medical Association (AMA). The program is designed to improve the health and well-being of individuals through regular physical activity prescription from physicians.

Today's Date _____ I am referring (print) _____

Phone _____ Date of Birth _____

Medical Information

Please indicate any physical limitations and/or guidelines:

Please list any restrictions _____

This physician referral indicates that my patient can benefit from an exercise program and has medical approval to participate in the YMCA of Greater Oklahoma City Exercise is Medicine program.

Physician Name _____

Physician Signature _____ Date _____

Phone _____ Fax _____

Please complete the form and email to:

Jessica Allen, jallen@ymcaokc.org | YMCA Healthy Living Center INTEGRIS

Autumn Bennett, abennett@ymcaokc.org | Midwest City YMCA

Jessica Brodmerkel, jbrodmerkel@ymcaokc.org | Edward L. Gaylord Downtown YMCA

Kristen DeYoung, kdeyoung@ymcaokc.org | Rockwell Plaza YMCA