

GREENFIELD WILDCATS ATHLETIC PHYSICAL PARTICIPATION PERMISSION FORM

In order to participate in a sport activity, your child needs a current physical before participation. Kelbey Bowles, APRN, FNP-C will be on-site providing these physicals **free of charge (only on this date)**.

This is a pre-season sports physical screening exam. It is not a comprehensive exam and it is not intended to provide treatment nor to create a physician/patient relationship. I understand that athletic participation comes with the risk of injury. This screening exam cannot detect all problems or prevent injury from athletic participation. I understand that if follow-up evaluation is recommended, it is my responsibility to seek care from an appropriate provider.

The Missouri State High School Activities Association states that any student who wishes to participate in any school sponsored athletic team or squad, must first have a current physical on file. **This permission slip must be signed by the student's parent/guardian and the HISTORY portion of the PPE (pre-participation physical evaluation) must also be completed before the physical can be done.** Please return the permission slip and PPE (with History portion completed) to the school, or have the two forms completed with you at the physical schedule date.

Date of physical: April 26th at 1:00pm at Greenfield Schools (parents are not required to be present)

I, _____ (parent/guardian name), give permission for _____ (child's name) in _____ (grade/teacher), to have a physical done by Kelbey Bowles, APRN, FNP-C and nurses.

___ Yes, I have attached the PPE with the History portion completed.

Parent/Guardian Signature: _____ Date: _____

