

Orange County Youth Football & Cheerleading 2015 Medical Information 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 Information Form must be returned to Washingtonville Youth Football & Cheerleading by July 1, 2015, either by mail or email. You can scan the document and email it to: info@go2wyfcl.com.

ORANGE COUNTY YOUTH FOOTBALL & CHEERLEADING LEAGUE 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.

****PLEASE LIST ANY ADDITIONAL ALLERGIES OR PHYSICAL CONCERNS THAT WE NEED TO KNOW ON THE BOTTOM OF THIS FORM**

FOOTBALL/CHEERLEADER INFORMATION

Player Name: _____

Date of Birth: _____

Address: _____

Telephone: _____

TO BE COMPLETED BY PHYSICIAN

Name of Physician: _____ Phone Number: _____

Allergies: _____

Physical or emotional concerns: _____

This child is in good health and may participate in football / cheerleading for the 2014 season.

Signature of Physician: _____ Date: _____

Physician Stamp:

Updated 2/20/2015