ARCHDIOCESE OF MILWAUKEE - PHYSICAL EXAMINATION FORM

ELEMENTARY SCHOOL INTERSCHOLASTIC ATHLETICS – BOYS AND GIRLS

*Approval for two years of competition. This form is required for all students new to the HAAA program and all students entering 7th grade. Examination cannot be taken before May 1st.

Student's Name: _____
Last Middle Initial First

Place of Birth (Cty, St.) _____

Age: _____Sex: _____

Date of Birth: _____Weight:_____Height:_____

The above named student has been examined and there are no apparent restrictions to participate in interscholastic athletic activities except as follows (if none - write NONE):
_____
_____
_____

*If approved for only one year of competition, check here. _____

Licensed Physician or Surgeon: _____
(print or type)

Signature of Licensed Physician or Surgeon: _____

Address: _____

City: _____State:_____ Zip: _____

Telephone: _____

Date of Examination: _____

ALL BOYS AND GIRLS PARTICIPATING IN INTERSCHOLASTIC ATHLETICS MUST HAVE THIS FORM ON FILE AT THEIR SCHOOL/PARISH, PRIOR TO PRACTICE OR PARTICIPATION. FORMS MUST BE SUBMITTED BY JULY 27, 2008

(Forms submitted prior to June 8th)
Attn: Holy Apostles School
Athletic Association
3875 South 159th Street
New Berlin, WI 53151

(Forms submitted after June 8th)
Attn: Brian Fridl
c/o HAAA
15885 W National Ave. #200
New Berlin, WI 53151

Form 6145(c) Archdiocese of Milwaukee
Form revised: 5-6-97