

GCRA <team name> 2025-26: Player Medical Info

Please complete the below to ensure that bench staff are aware of any medical history/concerns with your player. If there are ever any changes to the information you provide, please submit a new response to this form, or advise a member of the bench staff as soon as possible.

Disclaimer:

Medical forms will be held by team bench staff for emergency use only and shared only with medical personnel as needed. By submitting this form, you acknowledge and consent to this limited use and handling of your medical information.

* Indicates required question

1. Email *

2. Player's Name *

3. Emergency Contact #1 - Name *

4. Emergency Contact #1 - Phone # *

5. Emergency Contact #2 - Name *

6. Emergency Contact #2 - Phone # *

Medical Details:

Are there any medical conditions, past injuries, or other health-related information the bench staff should be aware of to ensure the safety of this player?

Please include any relevant details that could help us respond appropriately in case of an emergency.

7. **Allergies** – include food, medication, environmental *

8. **Medical Conditions** – e.g., asthma, diabetes, heart condition *

9. **Current Medications:** (if required in emergency where are they store i.e. epipens, inhalers etc.) *

10. **Past or Current Injuries:** *

11. **Additional Details:** (example Activity Restrictions, Special Instructions for Emergency Care, etc.)

12. Is there anything else about your player's health, well-being, or needs that would help us support them during practices, games, or team activities?

(Examples could include anxiety in certain situations, learning or communication preferences, or anything else you feel is important for us to know.)

13. **Consent Statement:** *

Check all that apply.

☐ I authorize team staff to provide basic first aid and share this information with medical professionals in an emergency. I confirm the information provided is accurate.

Disclaimer: Medical forms will be kept confidential by team bench staff and used only to assist in the event of an injury or medical emergency during team activities. They will be stored securely, accessed only by authorized personnel, and shared only with medical responders as needed. Bench staff are not medical professionals. Submission of this form constitutes consent to this limited use.

This content is neither created nor endorsed by Google.

Google Forms

