

**BRONCOS PLAYER MEDICAL INFORMATION SHEET**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: | |  | | | | | | | | | | | | | HIN#: | | | |  | |
| Date of Birth: | | | | | |  | | | | | | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | |
| Postal Code: | | | | |  | | | | | Telephone: | | | |  | | | | | | |
| Mother’s Name: | | | | | | | |  | | | | Father’s Name: | | | | | |  | | |
| Business Telephone Numbers: | | | | | | | | | Mother | |  | | | | | | | Father | |  |
| Alternate emergency contact (if parents are not available) | | | | | | | | | | | | | | | | | | | | |
| Name: |  | | | | | | | | | | | | Telephone: | | | |  | | | |
| Address: | | |  | | | | | | | | | | | | | | | | | |
| Doctor’s Name: | | | | | | |  | | | | | Telephone: | | | |  | | | | |
| Dentist’s Name: | | | | | | | |  | | | | Telephone: | | | |  | | | | |
| Date of last complete physical examination: | | | | | | | | | |  | | | | | | | | | | |

\* *Before any player participates in a baseball program, any medical condition or injury problem should be checked by that individual’s family physician.*

Please circle the appropriate response and provide details if you answer “Yes” to any of the questions.

|  |  |  |
| --- | --- | --- |
| Yes | No | Previous history of concussions |
| Yes | No | Fainting episodes during exercise |
| Yes | No | Epileptic |
| Yes | No | Wears glasses |
| Yes | No | If yes - Are lenses shatterproof |

|  |  |  |
| --- | --- | --- |
| Yes | No | Wears dental appliance |
| Yes | No | Hearing problem |
| Yes | No | Asthma |
| Yes | No | Trouble breathing during exercise |
| Yes | No | Heart Condition |
| Yes | No | Diabetic – Type 1\_\_\_\_\_ Type 2\_\_\_\_\_\_\_ |
| Yes | No | Medication |
| Yes | No | Allergies |
| Yes | No | Wears a medical information bracelet or necklace |
| Yes | No | If yes for what purpose: |
| Yes | No | Any other conditions your child’s Coach should be aware of? |
| Details: | |  |