



Orange County Public Schools, Florida

**Sports Screening/Physical
Parent/Guardian/Student Release Form**

Addendum to Athletic Sports Screening Physical Form
Required by any Student Participating in School Sports

- I. In addition to the routine sports screening evaluation required by s.1006.20, Florida Statutes and FHSAA Bylaw 11.8, you understand and acknowledge that you are hereby advised that the student should undergo a cardiovascular assessment, which may include such diagnostic tests as electrocardiogram (EKG), echocardiogram (ECG) and/or cardio stress test.

- II. You further hereby authorize the use or disclosure of your child's individually identifiable health information should treatment for illness or injury become necessary. You understand that this authorization is voluntary and that you may revoke it at any time by submitting the revocation in writing to your child's school principal.

- III. I/We Parent/Guardian and Student Athlete have read this information carefully.

This area of the form must be readable:

Print Student's Legal Name _____

School: _____ Grade: _____

Student Signature: _____ Date: _____

Parent/Guardian: _____

Parent/Guardian Signature: _____ Date: _____