

McLaren Print System Order

Order No: 48177 Reprint Previous Order No: 5517
Order Date: 2019-08-29
User: Kelly Lewis
Phone: 810-496-0916

Ship Location: Midland Occupational and Convenient Care
801 Joe Mann Blvd.
Midland, MI 48642

Forms

Quantity: 500
Paragon Dept No: 56062
Dept Name: Midland Occupational and Convenient Care
Company Number: 810

Order Total Price: 0.00

Item Number: MM-130
Item Description: Acknowledgement of Sports Physical
Revision Date: 6/2013
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish:
Drill: None
Misc Info:

McLaren Medical Group
ACKNOWLEDGEMENT OF SPORTS PHYSICAL

I, _____, acknowledge that the physical examination performed
(name of parent/legal guardian)
on my son/daughter, _____, is a limited examination only to
(name of son/daughter)
determine readiness for sports participation. It is not meant to be a substitute for a comprehensive
health maintenance examination. If such a comprehensive examination is desired, I understand that
an appointment for same must be scheduled in advance.

Signature of Parent/Legal Guardian Date _____

Signature of Witness Date _____

MM-130-010
ACKNOWLEDGEMENT OF SPORTS PHYSICAL

Parent Name
Date of Birth