

Student/Athlete Medical Release Form

Federal guidelines under HIPAA now requires a signed release form to be on file before any medical or financial information can be given on the named patient.

Student/Athlete: _____

Permission to discuss the medical condition of above name patient with the following people is granted for all school related health problems:

- 1) Athletic Director; 2) Coaches; 3) Trainers;
- 4) School Administration; 5) Insurance Agent (Planned Benefits Services)

Signed: _____ Relationship: _____

School: _____

The medical condition of the above named patient is not to be discussed with any person other than the patient and parents or guardians.

Signed: _____ Relationship: _____