



Special Olympics Pennsylvania

Dear Athlete, Parent or Guardian,

In order to participate with Special Olympics, Erie we require a complete ATHLETE MEDICAL form every three years. If an athlete has an expired ATHLETE MEDICAL FORM or has never participated with our organization before the medical form must be completed and returned to any Special Olympics Coach or by sending it to Nikki Delsandro @ Strong Vincent Middle School 1330 West 8th Street Erie, Pa 16502. Please have the athlete's primary care physician (Nurse Practitioner signature is not acceptable) complete this application.

When completing an application please use ***black or blue ink*** and be sure to include:

- Athlete Social Security Number or Health and Accident Insurance Information
- Athlete Date of Birth
- Athlete Name, Address, and Phone Number
- Parent or guardian Name, Address, and Phone Number
- Emergency Contact Name, Address and Phone Number
- Health Information (all areas must be circled Yes or No)
- Immunizations and Signature of person who completed the Health Information Section
- Medical Certification, Doctor's Information including Name, Address, and phone number, and Doctor's Signature with Date (Nurse Practitioner signature is not acceptable)
- If the athlete is a Minor (17 or under) PARENT must sign and date the RELEASE TO BE COMPLETED BY PARENT OR GUARDIAN OF A MINOR ATHLETE.
- If the athlete is an Adult (18 or older) the athlete must sign and date the RELEASE TO BE COMPLETED BY AN ADULT ATHLETE including the name of the adult reviewing the release with the athlete and their relationship to the athlete.

Please be sure to include all of the above information. If any of the information is missing on the application the athlete cannot participate until the medical has been completed.

Sincerely,
Nikki Delsandro
Manager, Erie Special Olympics

Let me win, but if I cannot win, let me be brave in the attempt. -- **Special Olympics oath**

**Special Olympics Pennsylvania Erie City
1330 West 8th Street Erie Pennsylvania 16502 ~ PHONE (814) 722-8417**