

OLYMPIA SCHOOL DISTRICT
ATHLETIC MEDICAL TRAVEL CARD

Sport _____

Student Name _____ Birthdate _____ Grade _____

Parent Name _____ Phone _____

Home Address _____

Mother's Work Phone _____ Father's Work Phone _____

Alternative Person(s) to be notified in case of emergency:

Name _____ Home Phone _____ Work Phone _____

Name _____ Home Phone _____ Work Phone _____

Physician of 1st Choice _____ Phone _____

Preferred Hospital _____ Phone _____

If the parents/guardians and authorized physician named above cannot be reached at the time of emergency, and if immediate observation or treatment is urgent in the judgment of the school authorities, do you authorize and direct the school authorities to send the pupil (properly accompanied) to the hospital or doctor most easily accessible? _____ Yes _____ No

Do you agree to be financially responsible for all expenses incurred for treatment under the circumstances described above? _____ Yes _____ No

Name of Insurance Company _____ ID# _____

If the answers to any of the above questions are NO, please explain what action you desire school authorities to take _____

Specify any allergies or other medical conditions your child has which first-aid personnel should be aware of _____

Parent or Legal Guardian Signature

Date _____

PAY TO PLAY

OSD has implemented a "Pay to Play" fee of \$30.00 for each sport. Middle school sports are girls volleyball, boys football, girls basketball, boys wrestling, girls soccer, boys basketball and girls and boys track. This fee needs to be paid before the first game/match of each season. If your child needs a scholarship, please contact the Reeves office. Thank you