

September 2017

Dear Parents/Guardian:

In order to participate in our soccer, basketball or softball teams, each player is required to have a Physical Examination.

You may use your own private Physician, or the physical exam can be done by Chapel Hill Academy's School Physician. The school's physician will be here to give physicals on Wednesday, September 13th and Wednesday September 20th.

PLEASE NOTE – If you have the physical exam done by your private Physician, it MUST be documented on the NJ Pre Athletic Physical Exam form. There is no exception to this, as this is the requirement of the State of New Jersey. Under no circumstance can a student participate in a sport without clearance documented on this form.

Please complete the bottom portion of this letter, as well as the attached form and return it to me at Chapel Hill Academy.

If you have any questions, please call me at 973-686-0004 x1107.

Lisa Bell, RN, BA, CSN
School Nurse

Name of Student: _____
(Please print)

_____ I give permission for my child to have a physical by Chapel Hill Academy's Physician.

_____ My child will have a physical performed by our family physician and documented on the NJ Pre Athletic Physical form.

Parent/Guardian's Name: _____
(Please Print)

Parent/Guardian Signature: _____