

70 Lincoln Center Plaza New York, NY 10023-6592 212.769.6600 646.380.6132 (fax)

2020 Young Dancer Series Physician's Medical Report

Annual medical check-ups are required to attend the School of American Ballet. The completion of this Physician's Medical Release must be based on a physical exam that occurred (or will occur) after June 22, 2019.

MEDICAL REPORT: Please have your child's physician complete the following report.

| Student Name: | | | _ |
|--|---------------------------------|---|---|
| I verify that all immunizations a | re up to date for this student | Yes No | |
| Height Wei | ght | | |
| activities. I certify that I have program (June 22, 2020) and th | given this student a physical e | and participate in a full range of physic exam within 12 months of the start of the apable of participating in ballet training. | |
| Signature of Health Care Provider | | Date | |
| Print or Type Name of Health Care F | Provider Address | Telephone | |

IF YOU ARE UNABLE TO UPLOAD THIS DOCUMENT TO THE INFORMATION UPDATE FORM REQUIRED FOR ENROLLMENT, PLEASE RETURN THIS FULLY COMPLETED HEALTH FORM TO:

HANNAH FEDERAU SCHOOL OF AMERICAN BALLET 70 LINCOLN CENTER PLAZA NEW YORK, NY 10023 HFEDERAU@SAB.ORG 646-380-6132 (FAX)