

**P A R E N T A L & M E D I C A L  
F O R M**

*Alderson-Broaddus College does not carry health insurance for students participating in special programs. For your protection, we require that your personal health and accident insurance information be on file.*

Name \_\_\_\_\_

Soc. Sec. # \_\_\_\_\_

Date of Birth \_\_\_\_\_

Primary Physician & Phone \_\_\_\_\_

Name/Address of Insurance Company  
\_\_\_\_\_

Policy # \_\_\_\_\_ Group # \_\_\_\_\_

HMO Authorization # \_\_\_\_\_

Any medical conditions \_\_\_\_\_  
\_\_\_\_\_

Person to notify in case of an emergency & phone #  
\_\_\_\_\_

Every effort will be made to consult with the above named emergency contact before referral to local hospitals or physicians. To prevent delay or emergency care, I (Parent/Guardian)

\_\_\_\_\_ give consent to Alderson-Broaddus College to obtain medical care for \_\_\_\_\_

Signature (Parent/Guardian)

Alderson-Broaddus College

Carrie Bodkins-Volleyball Coach

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**2008**

**Alderson-Broaddus  
College**

**Volleyball**

**INDIVIDUAL Camp**

**July 21-24**

**“The time will come when winter will ask what you were doing all summer.”**

