May 31st – June 1st, 2024
Mitchel Athletic Complex &
Nassau Community College

NASSAU COUNTY GAMES FOR THE PHYSICALLY CHALLENGED
BRUCE A. BLAKEMAN
COUNTY EXECUTIVE

School Code

Please keep a copy of this form for your records

Athlete Medical Information & Waiver

PLEASE PRINT

Athlete Last Name | Athlete First Name

Street Address

City | State | Zip Code

Person to contact in case of Emergency_____
(PLEASE PRINT)

Relationship to Athlete | Emergency Daytime Phone Number (Area Code) | Other Emergency Phone Number (Area Code)

Athlete Medical Information - please check the appropriate boxes

Allergies ☐ NO ☐ YES (Specify_____)

Medications ☐ NO ☐ YES (List_____)

Athletic limitations: ☐ NO ☐ YES (Specify_____)

Heart/blood pressure problems: ☐ NO ☐ YES

Seizure type _____ controlled. Date of last seizure _____

Motor Impairment: ☐ Power chair ☐ Gait trainer ☐ Walker or Crutches ☐ Wheelchair

☐ I **DO NOT** consent to my name to appear on ANY Website Roster or Results pages.

☐ I **DO NOT** consent to be photographed.

Reminder: **To participate in the Games, the Waiver (see attached) must be signed by the participant if over the age of 18 or a parent or guardian of participant under the age of 18. All MEDICAL/EMERGENCY INFORMATION MUST BE COMPLETED.**

Deadline for entries: April 1, 2024

Return this form by April 1, 2024: By Fax: (888) 863-7491 OR Email to: victorychallenge@nassaucountyny.gov

Nassau County Games for the Physically Challenged, Nassau County Department of Parks, Recreation & Museums, Administration Building, Eisenhower Park, East Meadow, NY 11554
516-903-1139
Website: www.nassaucountypcgames.com