



**ATHLETIC PRE-PARTICIPATION PHYSICAL RECORD AUTHORIZATION ADDENDUM**

This addendum is required for completion of school-based athletic physical examinations and is incorporated into the VHSL Pre-Participation Physical Examination (PPE) process for Loudoun County Public Schools (LCPS).

**Purpose**

To ensure student safety, continuity of care, and compliance with Virginia law and LCPS requirements, completed physical examination forms must be maintained by LCPS athletic healthcare staff.

**Authorization to Maintain Physical Examination Record**

*I authorize LCPS athletic staff to maintain this physical form, in its entirety, in the student's record for participation clearance, medical review, and emergency care, in accordance with all applicable privacy guidelines.*

**Parent/Guardian Acknowledgement**

Parent/Guardian Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

School: \_\_\_\_\_

**IMPORTANT NOTICE:** If this authorization is not signed, physicians assisting with LCPS-sponsored or school-based athletic physicals may be unable to complete the physical examination.

**Thank you for your cooperation and support in maintaining safe and compliant athletic participation process for all student-athletes.**