

Dear Student-Athlete:

Enclosed you will find your Pre-Participation packet. Please review all information and complete the packet in its entirety with accurate and detailed information. This packet is required of all student-athletes entering the Furman University Intercollegiate Athletic Program prior to participation.

This packet includes the following forms:

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| _____ 1. Notice of Privacy Policies and Practices | Requires signatures on Consent and Authorization forms. |
| _____ 2. Athletic Insurance Program | Requires completion of enrollment forms. Attach a copy (front & back) of insurance cards. |
| _____ 3. Informed Consent | Requires printed name, signature and date. |
| _____ 4. Medical History | Requires detailed description of injuries including dates. Include copies of physician's records pertaining to orthopedic injuries during the past three years. |
| _____ 5. Sickle Cell Trait Confirmation | Requires printed name, date, and test results. Physician's name, signature and date. |
| _____ 6. Substance Abuse Policy | Requires completion of drug testing consent forms. |

Return all enclosed information by July 16, 2010, so your file will be complete when you arrive. No student-athlete is allowed to participate until the completed packet is received and reviewed. Please mail all completed information in an 8 ½" X 11" envelope to:

**Furman University Sportsmedicine Center
Timmons Arena
3300 Poinsett Highway
Greenville, SC 29613
Attn: Cassandra Phillips**

Cordially,

Cassandra Phillips, MA, ATC
Assistant Athletic Trainer
Furman University

Enclosures