

**STATEMENT OF PHYSICAL EXAMINATION
AMERICAN LEGION BASEBALL
DEPARTMENT OF SOUTH DAKOTA**

Physical examinations of each member of the American Legion Baseball Team at _____, SD have been obtained.

As listed on the attached Team Certificate of Entry, the player has had a physical examination by a competent physician within the current school year. It is further certified that no condition has been found on any players, which would be aggravated or endangered by active participation in the sport of baseball.

Signed _____ Date _____
Team Manager