Royal Rangers Medical Release Form

Royal Rangers Medical History/ Release Form -- Chartering Dates Sep, 20____ thru Aug, 20____ All information on this form is private & shall remain confidential

Name: Birth Date Home Address: City						_			
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mail address:			0)P#	Divi	sion Church			
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) Emergency Contac	t:		Relation:			Phone:			
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	Yes	No		Yes	No		Yes	No	
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ar&Problem&	&	&	Skin&Infection&		&	Disease&past&3&weeks&			
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Signature of Notary