



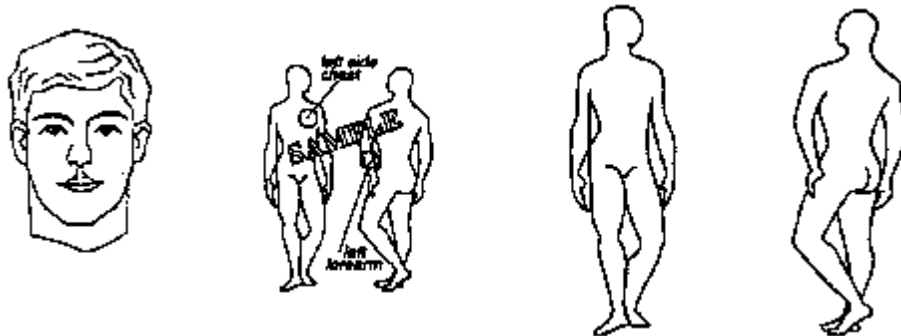
SKIN CONDITION EVALUATION AND AUTHORIZATION TO COMPETE IN IESA WRESTLING

TO PHYSICIAN: National Federation Wrestling Rules state:

If a participant is suspected by the referee of having a communicable skin disease or any other condition that makes participation appear inadvisable, his coach shall provide written documentation from a physician stating that the suspected disease or condition **is not communicable** and that the athlete's participation would not be harmful to his opponent. This document shall be furnished at the weigh-in or prior to competition in the dual meet or tournament. COVERING A COMMUNICABLE CONDITION SHALL NOT BE CONSIDERED ACCEPTABLE AND DOES NOT MAKE THE WRESTLER ELIGIBLE TO PARTICIPATE. **NOTE: By National Federation rule, the official has the final decision.**

This form is for the following wrestler: _____
(name of wrestler)

1. Indicate the specific location of the suspected skin condition on the figures below:



2. Describe:
(example: it is about the size of a nickel, red in color, etc.)

3. Do you believe this skin condition is currently contagious? Circle one: **YES NO**

4. If currently contagious, when will it no longer be communicable?

Please list calendar date: _____

5. Please give your diagnosis: _____

6. If this is a birthmark, non-communicable skin condition, i.e. psoriasis or eczema, check **Yes** (Valid for the year)

Note to schools: Medical authorizations to compete expire 14 calendar days from the date of examination.

If the answer to question #3 above is "No," physician is certifying that this wrestler is not contagious and assumes responsibility for this decision.

Print Physician's name: _____

Physician's signature: _____

Examination Date: _____

