



## Foundation Learning Academy

7137 Queenston Blvd.

Houston, TX 77095

Phone: (281) 861 – 5677

Fax: (832) 427 – 6576

# PHYSICIAN RELEASE

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Parents Name: \_\_\_\_\_

I have examined the child named above on \_\_\_\_\_(date).

This child is able to take part in the Foundation Learning Academy's program and participation in age appropriate activities.

\_\_\_\_\_  
Physicians Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number