



Sports Physicals

Performed at:

South Coast Medical Group

5 Journey Suite 130

Aliso Viejo, CA 92656

June 16-19th, from 2pm to 5pm

AVHS Athletic Department will assign time slots for all athletes

\$40

South Coast Medical Group
will donate \$20
of this fee back to
ANHS Athletics



Please make checks out to SCMG, place the athletes name in the memo section or you can Venmo @Doctor-Cheng and place the Athletes name in the memo section

WWW.SouthCoastMedGroup.com

Parent / Guardian Consent

Student Name: _____ DOB: _____

Parent/ Guardian Name: _____ Contact Number: _____

Address : _____ City: _____ State: _____

My signature below authorizes South Coast Medical Group and it's associates to perform a physical exam on my child.

Parent / Guardian Signature

Date