

JOURNAL OF ATHLETIC TRAINING

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Case Report Release Form

Release of information for case report:

Date: _____

I, _____ freely give my consent for the release of information regarding my medical history, injury, surgery, and rehabilitation for use in the following case report, which is being submitted to the *Journal of Athletic Training*:

Author(s):

Title:

I understand that this information may be used in publication and that my name will remain confidential.

Signature: _____

Witness: _____