

# SASS GO INSTRUCTOR CANDIDATE APPLICATION



## PHYSICIAN APPROVAL FORM

Please complete and submit a pdf copy with your electronic application. If you need to submit your Physician Approval Form separately, please email Brett Brown at [brettbrown@sassgo.org](mailto:brettbrown@sassgo.org).

### SECTION 1

*(To be completed by Candidate)*

Candidate Name \_\_\_\_\_

SASS Go's policy regarding application for Instructor Candidate Training requires all participants to submit a completed Physical Approval form prior to participation. Participation is contingent upon your physician's approval/disapproval. I hereby give my physician permission to release any requested pertinent to the staff of SASS Go. I understand that this information will be kept confidentially.

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

### SECTION 2

*(To be completed by candidate's physician)*

Dear Physician,

Your patient, name above, has expressed an interest in participating in SASS Go Instructor Candidate Training. During training, participants are led by a trained instructor through a variety of physical movements that include cardiovascular, muscular and flexibility training; or a combination of all three. Classes may include repetitive low to high impact moves that will result in elevations of heart rate, and blood pressure; or a series of moves that will target the core and challenge both mind and body. It is the responsibility of the participant to communicate information medical or otherwise that might preclude the participant from involvement in any particular activity.

**Please mark the appropriate statement below concerning this patient.**

No restrictions apply as to type of class/training program

The following restrictions should apply \_\_\_\_\_

Participation is not recommended at this time.

Physician Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Physician Name (print, type, or stamp) \_\_\_\_\_

Address \_\_\_\_\_

Questions directed to SASS Go Director of Education, Brett Brown, at [BrettBrown@SASSGo.org](mailto:BrettBrown@SASSGo.org) or 803-553-8822