



JOURNAL OF **ATHLETIC TRAINING** - EDUCATION AND PRACTICE

RELEASE OF CASE REPORT

Date _____

I _____, hereby give my permission for release of
information regarding my medical history, injury, surgery, and rehabilitation to be reprinted
in a manuscript entitled

“ _____
_____ ”

by authors _____

in the *Journal of Athletic Training-Education and Practice*. I understand that this information
may be used in publication and that my name will remain strictly confidential.

Signature of participant

Signature of witness

Name of witness

Signature of primary author