

# Sports Medical Evaluation Schedule

Dear [Athlete's Name],

We are pleased to inform you that your sports medical evaluation has been scheduled as follows:

- **Date:** [Insert Date]
- **Time:** [Insert Time]
- **Location:** [Insert Location]

Please arrive at least 15 minutes early to complete any necessary paperwork. Bring any relevant medical records and wear appropriate athletic attire.

If you have any questions or need to reschedule, please contact us at [Insert Contact Information].

Thank you!

Sincerely,

[Your Name]

[Your Position]

[Organization Name]

[Contact Information]