

Sports Physical Examination Clearance Letter

Date: [Insert Date]

To Whom It May Concern,

This letter serves to confirm that [**Athlete's Name**], a participant in competitive gymnastics, has undergone a thorough sports physical examination on [**Examination Date**].

After reviewing the athlete's medical history and conducting a complete physical assessment, I have determined that they are medically fit to participate in gymnastics at a competitive level. They are advised to adhere to proper training protocols and safety measures during their participation.

Should you have any questions regarding this examination or the athlete's health, please feel free to contact my office at [**Contact Information**].

Sincerely,

[**Physician's Name**]

[**Title**]

[**Medical Office/Practice Name**]

[**Contact Information**]