



BIRCH CREEK SERVICE RANCH, INC.

Doctor's Affidavit –

**The application will not be accepted without a signed doctor's affidavit*

I have recently examined the young person named in this application. With the exception noted below, I certify that medically he/she should be allowed to participate in all normal Ranch activities which include sports, ranch/farm work, swimming, mountain biking, hiking, backpacking at high altitudes, horseback riding, rock climbing, etc.

Exceptions/Limitations/Relevant concerns:

Date of most recent tetanus booster:

Doctor's Name (please print)

Work Phone

Doctor's Signature

Date