

Medical Treatment Concerns

Please inform the Race Medical Staff by turning in this form if any of your cyclists have any medical concerns such as:

- Allergy to Latex (a material in many medical products)
- Severe allergy to bee stings
- Other allergies

or medical disorders such as:

- Diabetes Mellitus
Insulin dependent? No Yes
- Seizure disorder
- Asthma

or other medical concerns that you wish the Race Physicians to be aware of.

Cyclist Name _____ Bib No. _____

Medical Concern: _____

Allergy: _____

This information will be kept strictly confidential.

Thank you,

Lauren M. Simon. M.D.
Race Medical Director