



SPORTS MEDICINE -RETURNING STUDENTS

Please go to the [Pre-Participation Requirements](#) for a more detailed description of what is required and needed for your upcoming Academic Year

- ☐ I have registered and logged into the [Student Health Portal](#)
- ☐ Medical records from Specialist uploaded to the [Student Health Portal](#)
- ☐ Clearance Letter for Participation from Specialist has been requested on ____/____/____ and uploaded to the [Student Health Portal](#)
- ☐ I have completed the online forms for sports medicine on the [Student Health Portal](#)
- ☐ I have registered in [ARMS](#) as directed by my coach
- ☐ I have entered my Insurance information in [ARMS](#)
- ☐ I have uploaded my insurance card front & back to the [Student Health Portal](#)
- ☐ I have uploaded front & back my domestic or international form of ID to the [Student Health Portal](#)

Please be sure to reply to any emails sent by Amal C Duprey (aduprey@middlebury.edu) and your athletic trainer that is assigned to your respective sport.

AMAL CHARLOTTE DUPREY, BSBM, CPC
Clinical Administrative Associate- Sports Medicine
Middlebury College | 219 South Main Street
Peterson Family Athletics Complex
Middlebury, VT 05753
Office: 802.443.3636 | Fax: 802.382-1899 |
[Athletics Website](#)

