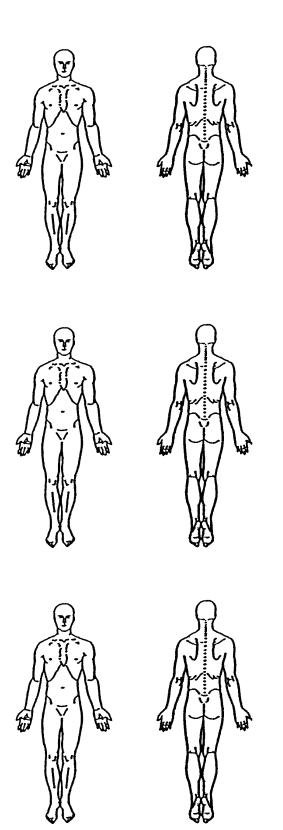
## **HISTORY OF INJURIES**

NAME\_\_\_\_\_\_DATE\_\_\_\_\_

## PLEASE MARK ALL PLACES THAT HAVE EVER BEEN INJURED

Sprains/Strains, Broken Bones, Severe Bruises, Surgery, Scars, Head Bumps, Cuts, Burns, Etc.



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What happened?	When did it happen?
XX/14 1	<b>XX</b> 71 19.1.94.1
What happened?	When did it happen?
What happened?	When did it happen?