



**HAND OF HOPE**®

**JOYCE MEYER MINISTRIES WORLD MISSIONS**

## Doctor's Release

*Trip Dates:* Between \_\_\_\_\_ and \_\_\_\_\_, 20\_\_\_\_.

*Destination(s):* \_\_\_\_\_

I am unaware of any medical reason that would prevent \_\_\_\_\_ from traveling and participating in Medical/Dental outreaches for the above mentioned dates.

Is the patient pregnant? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, I release the patient to travel YES \_\_\_\_\_ NO \_\_\_\_\_.

\_\_\_\_\_  
**Doctor**

\_\_\_\_\_  
**Date**