Concussion Policy and

Informed Consent Form

Please visit the website of the Centers for Disease Control and Prevention to understand the risks of concussion, prevention, and other safety measures.

Definitions

"Athlete" means any individual who participates in an Athletic Activity.

"Athletic Activity" means any practice, tryout, workout, competition, or other physical activity associated with participation in or candidacy for an athletic team or athletic event.

"Coach" means any individual who is responsible for organizing, directing, or instructing Athletes during any Athletic Activity.

"Concussion**"** A type of brain injury or traumatic brain injury (TBI) caused by a bump blow or jolt to the head or a hit to the body that causes the head and brain to move rapidly back and forth. – (visit the CDC.gov website for more information)

"Parent or Guardian" means a Youth Athlete's parent, legal guardian, or other person having legal custody of the Youth Athlete.

"Youth Athlete" means any Athlete who is younger than the age of majority.

Informed Consent Requirement

Before any athlete participates in an athletic activity, each Athlete (or Youth Athlete's Parent or Guardian, as the case may be) is required to sign this form and **return it to your Coach** for record keeping each year.

Removal and Return-to-Play Policy

An Athlete who is suspected of sustaining a concussion during any Athletic Activity (as determined by a Coach or other authorized individual present) shall be immediately removed from the Athletic Activity. An Athlete who has been so removed may not return to play on the same day.

An Athlete who has been removed from an Athletic Activity may not return to any Athletic Activity until the Athlete has submitted to the Coach a written medical clearance by a licensed medical professional trained in the diagnosis, evaluation, and management of concussions stating that the Athlete no longer exhibits signs, symptoms, or behaviors consistent with a concussion.

☐ I have read and agree to comply with the above policy.

Date: _____ (consent expires 1 year from this date)

Print Athlete Name: _____

Authorized Signature: _____