

STUDENT NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_

**Heads Up: Concussion in High School Sports Acknowledgement**

IMPORTANT: Students (grades 7-12) participating in interscholastic athletics, cheerleading and dance; and their parents/guardians; must annually sign the acknowledgement below and return it to their school. Students cannot practice or compete in those activities until this form is signed and returned.

We have received the information provided on the concussion fact sheet titled, "HEADS UP: Concussion in High School Sports."

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's/Guardian's Signature

\_\_\_\_\_  
Date

**Inherent Risk in Athletics Acknowledgement**

Due to the nature of physical contact that is involved with athletics, cheerleading, and dance, injury among participants is possible. Athletes and parents need to be aware of the inherent risk involved. Although coaches and sponsors will do everything possible to insure the safety of athletes during practice and competition, there is a risk of injury to participants, including severe injury and even possible death. It is the responsibility of the school to inform parents and athletes about the possibility of injury when participating in athletics, cheerleading, and dance. Signing below indicates acknowledgement of the inherent risk involved in athletics, cheerleading, and dance. Students cannot practice or compete in those activities until this form is signed and returned.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's/Guardian's Signature

\_\_\_\_\_  
Date

**Parental Insurance Waiver**

We, the undersigned, feel that we have adequate insurance protection for our son/daughter and will assume all responsibility for injuries incurred while practicing for or participating in interscholastic sports. Students cannot practice or compete in those activities until this form is signed and returned.

\_\_\_\_\_  
Parent's/Guardian's Signature

\_\_\_\_\_  
Date