



PARENT & ATHLETE AGREEMENT

Related to Concussion Law WI Stat. 118.293

As a Parent and as an Athlete it is important to recognize the signs, symptoms, and behaviors of concussions. By signing this form, you are stating that you understand the importance of recognizing and responding to the signs, symptoms, and behaviors of a concussion or head injury. *This form must be on file for every sports season and every youth athletic organization the athlete is involved with and must be renewed each school year (clubs- every 365 days).*

Parent Agreement:

I _____ have read the Parent Concussion and Head Injury Information and **understand** what a concussion is and how it may be caused. I also understand the common signs, symptoms, and behaviors. I agree that my child must be removed from practice/play if a concussion is suspected.

I understand that it is my responsibility to seek medical treatment if a suspected concussion is reported to me.

I understand that my child cannot return to practice/play until providing written clearance from an appropriate health care provider to his/her coach.

I understand the possible consequences of my child returning to practice/play too soon.

Parent/Guardian
Signature _____ Date _____

Phone _____ Phone _____

Athlete Agreement:

I _____ have read the Athlete Concussion and Head Injury Information and **understand** what a concussion is and how it may be caused.

I understand the importance of reporting a suspected concussion to my coaches and my parents/guardian.

I understand that I must be removed from practice/play if a concussion is suspected. I understand that I must provide written clearance from an appropriate health care provider to my coach before returning to practice/play.

I understand the possible consequence of returning to practice/play too soon and that my brain needs time to heal.

Athlete
Signature _____ Date _____ Grade _____



Dear Parent/Guardian,

At Horning Middle School safety is our #1 priority. It is important that we inform students and families about the risks, signs, symptoms, and behaviors of concussion which could happen during the school day or after school during an extracurricular activity.

Below are links to DPI's Parent Concussion and Head Injury Information and Athlete Concussion and Head Injury Information. Both of these documents are also available on the Horning Website and in our attendance office.

Parent Concussion and Head Injury Information:

English: www.goo.gl/eTgAQt

Spanish: www.goo.gl/4KQuyp

Please return this signed form to Horning Middle School when completed.

Thank you,

Susan Inkmann
Dean of Students/Activities Director
Horning Middle School.