

**Concussion Awareness
Parent/Student-Athlete Acknowledgement Statement**

| _____, the parent/guardian of _____,
Parent/Guardian Name of Student-Athlete

acknowledge that I have received information on all of the following:

- **The definition of a concussion**
- **The signs and symptoms of a concussion to observe for or that may be reported by my athlete**
- **How to help my athlete prevent a concussion**
- **What to do if I think my athlete has a concussion, specifically, to seek medical attention right away, keep my athlete out of play, tell the coach about a recent concussion, and report any concussion and/or symptoms to your physician.**

Parent/Guardian _____ Date _____
SIGNATURE

Student Athlete _____ Date _____
SIGNATURE

It's better to miss one game than the whole season.