

HEADS x UP CONCUSSION IN HIGH SCHOOL SPORTS

I acknowledge that I have read the *Heads x Up Concussion In High School Sports* fact sheet for parents.

Signature of Parent/Guardian _____ **Date** _____

I acknowledge that I have read the *Heads x Up Concussion In High School Sports* fact sheet for athletes.

Signature of Athlete _____ **Date** _____

Has athlete ever had a concussion ___ Yes ___ NO **If yes – dates** _____

The Parental Consent and Release from Liability and Indemnity Agreement must be read and signed by the parent/guardian and acknowledgement of reading the *Heads x Up Concussion In High School Sports* fact sheets must be signed by both the parent/guardian and athlete before a student may participate in athletics.

Health Insurance _____ *Policy #* _____

Allergies: _____

Medical Problems _____

 ; Asthma ; Diabetes ; Seizure Disorder ; Epi Pen

Please sign below if you give us permission to share/consult regarding this information with staff and emergency medical personal.

Signature of Parent/Guardian _____ **Date** _____

MANDATORY PHYSICAL EXAMINATION

All athletes must pass a physical examination within thirteen (13) months of the start of each season. Athletes who meet this criteria at the start of the season will remain eligible for that season. Physical examinations must be performed by a duly registered Physician, Physician’s Assistant or Nurse Practitioner.

NOTE: Both the 1) Permission Slip and 2) a valid current physical examination form must be on file before the start of the season. A student is prohibited to tryout for a team if either document is not on file.

All students regardless of race, color, sex, religion, national origin, limited English proficiency, sexual orientation, disability, or housing status, have equal access to all programs, including athletics and other extracurricular activities.

Mansfield High School Athletics Department Permission Slip

I give permission for my son/daughter _____
to participate in Mansfield High School Athletics during the 2012/13 school year.

Date of first enrollment at the high school level: Month _____ Year _____

School(s) attended during the 2011/12 school year: _____

My son/daughter is interested in participating in the following sports:

Fall _____ Winter _____ Spring _____

Athlete's Name (**Print**) _____ Date of Birth _____ Grade _____
2012/13

Home Address _____

Athlete's e-mail _____ Cell Phone # _____

Father's Name _____ Home Phone # _____

Father's e-mail _____ Cell Phone # _____

Mother's Name _____ Home Phone # _____

Mother's e-mail _____ Cell Phone # _____

If you would like to receive emails from Boosters, please list an email address _____

Emergency Name _____ Emerg. Phone # _____

*****Mansfield High School Student Handbook Policies*****

I acknowledge I have read the *Athletic Department Rules/Policies in the Mansfield High School Student Handbook*.

Athlete's Signature _____ **Date** _____

Parent's Signature _____ **Date** _____

*****MANSFIELD PUBLIC SCHOOLS ATHLETICS PARENTAL CONSENT***** RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT

I the undersigned father/mother or guardian of _____
a minor, do hereby consent to his/her participation in voluntary athletic programs and do forever RELEASE, acquit, discharge and covenant to hold harmless the Town of Mansfield, a municipality of the State of Massachusetts, and its successors, departments, officers, employees, servants and agents, of and from any and all actions, causes of actions, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly, all known and unknown personal injuries or property damages which we/I may now or hereafter have as the parent(s) or guardian(s) of said minor; and also, all claims or right of action for damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority resulting or to result from his/her participation in the Mansfield Public Schools athletic programs; Furthermore, we/I hereby agree to protect the Town of Mansfield and its successors, departments, officers, employees, servants and agents, against any claims for damages, compensation or otherwise on the part of said minor, growing out of or resulting from injury to said minor in connection with his/her participation in the Mansfield Public School's voluntary athletic programs, and to indemnify, reimburse or make good to the Town of Mansfield or its successors, departments, officers, employees, servants and agents any loss or damages or costs, including attorney's fees, the Town or its representatives may have to pay if any litigation arises from said minor's intentional, grossly negligent or reckless acts or omissions while participating in said sports programs.

Signature of Parent/Guardian _____

Relationship _____ **Date** _____