

Athletic Handbook

Voluntown Public School System
Voluntown, Connecticut

MISSION STATEMENT

It is the philosophy of the Voluntown Public School System to promote a positive atmosphere to help students grow academically, socially, and emotionally. Our entire staff is dedicated to providing all students with a productive and enjoyable environment and encourages all students and parents to become allies in this endeavor as they complete the 8th grade graduation requirements and make the transition to high school. Our athletic program is believed to be a valuable asset to the total education process; therefore, the program operates within the same objectives and goals of the overall educational program. Research has shown that athletics at the middle school level help to foster team building skills, problem solving skills, self-discipline, and self-confidence. Through the development of these skills it is believed that our student-athletes will become confident, contributing members of the school community.

GOALS OF THE ATHLETIC DEPARTMENT

- To develop sport skills by maximizing participation and focusing on instruction.
- To develop the positive values of athletics, including sportsmanship, teamwork, cooperation, and competition.
- To provide as many students as possible the opportunity to participate in activities they enjoy.
- To foster academic and athletic achievement in students by emphasizing the importance of self-discipline, sacrifice and dedication to achieving goals.
- To develop in students emotional control, dependability, and respect for rules, property and authority.
- To provide students the opportunity to work as a member of a team in order to achieve a goal, and in the process, learn the importance of cooperation, teamwork and good sportsmanship.
- To provide students with experiences which require problem solving, decision- making, and critical thinking skills.
- To provide students the opportunity to pursue physical fitness as a means of mental well-being.
- To develop in students a sense of school loyalty, and generate school spirit.

ATHLETIC PROGRAMS

Interscholastic Athletics

<u>FALL</u>	September-October	Boys' & Girls' / Coed JV and Varsity Soccer *
<u>WINTER</u>	November-February	Cheerleading * Boys' & Girls' JV and Varsity Basketball *
<u>SPRING</u>	April-May	Boys' & Girls' Track and Field

* These teams have limited roster spots and typically require a "tryout".

<u>Intramurals</u>	February-April	Coed Volleyball
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EXPECTATIONS/CONSEQUENCES FOR STUDENT ATHLETES

Voluntown Public School System holds its athletes to high standards. Student athletes are seen as representatives of both our school and our town, therefore are expected to adhere to all school and athletic department rules.

All student-athletes are expected to:

- Return completed participation form prior to the first scheduled practice.
- Remain academically eligible. **Student-Athletes must be passing all subjects (including specials, chorus and/or band) according to board policy, with an average of 65% or above. Students must maintain passing grades during the duration of the season.**
 - Academic eligibility will be determined at the **START** of the season/prior to tryouts, **MID-WAY** through the season, **AND** at scheduled reporting periods by the Athletic Director.
 - Student-Athletes who become academically ineligible are considered to be on “Academic Probation” for a period of 2 weeks AND will adhere to the following requirements:
 - *NOTE: FOR TRACK SEASON- Academic Probation is for 1 week.
 - Attend the after-school tutorial program for the “2 week Academic Probation” period. After-school tutorial takes place on Tuesday, Wednesday, and Thursday from 3:20-4:20pm.
 - Participate in practice/home games after the dismissal of the after-school tutorial program at 4:20pm.
 - Will NOT participate in away games on after-school tutorial days (Tuesday, Wednesday, and Thursday).
 - Eligibility will be reassessed after the “2 week Academic Probation” period
 - If the student-athlete meets academically eligibility (passing all subjects with an average of 65% or above), they will be cleared to participate. Upon their return, playing time will be determined by the Coach.
 - If the student-athlete does not meet academic eligibility (passing all subjects with an average of 65% or above), they will be dismissed from the team.
- Athletes will practice helpfulness by supporting excellent home/school communications by sharing notices and information with parents.
- Behave in a responsible manner, realizing at all times, they represent their school and community.
 - 3 morning/afternoon detentions during the season will result in expulsion from the team. (3 Lunch Detentions will count as one morning/afternoon detention. Afternoon detentions will be treated as an unexcused absence.)
 - *Track Athletes 2 morning/afternoon detentions during the season will result in expulsion from the team.
 - Students suspended from school, (in-school or out of school) will be dismissed from the team.
- Attend and arrive on time for all practices and games.
 - Need to submit a written excuse prior to the game or practice to be excused.
 - Need to participate in scheduled PE class on days of after-school activity.
 - Need to be in school for at least a half day to participate.
 - School team games take precedence over club practices.
 - Three unexcused absences will result in immediate dismissal from the team.
 - *Track Athletes will be given one unexcused absence due to the length of season.
- Travel to all away athletic contests by team bus.
 - Athletes being transported by parents/guardians must provide the coach with written permission prior to the athletic event and sign out their child after the game.
 - Athletes traveling by bus are expected to follow all school policies noted in school handbook.
- Refrain from using profanity or obscene language or gestures.
- Show good sportsmanship and respect for officials, coaches and fellow athletes.
- Win with dignity and lose with grace.
- Play fair, play hard and put forth their best effort in practice and in competition.
- Care for and return all athletic equipment issued throughout the season.
 - All uniforms issued to athletes are the property of the school and must be properly cared for by the student.
 - All uniforms must be returned, properly cleaned, at the conclusion of the season.
 - Lost or damaged uniforms will become the financial obligation of the student. Final report card will be withheld until payment is made.

LOCKER ROOM PROCEDURES FOR 7th/8th GRADE STUDENTS AND STUDENT ATHLETES (GRADES 5-8)

Each student in 5th-8th grade will be provided one locker with a combination at the beginning of the year. Their teachers will inform students the appropriate time to go to their lockers. Students are not to share lockers nor are they to distribute combinations to other students. Any student who tampers with, or enters, or attempts to enter another person's locker will be subject to disciplinary action. The school follows Connecticut State Law and Board of Education policy regarding search and seizure of property or person. Lockers are school property and may be accessed by authorized school personnel.

Students are offered a locker to safeguard their personal property. The school is not responsible for items that are lost, damaged, or stolen in lockers. Students should never share their combination with another student. Students are to pay close and precise attention to make sure their locker is closed and locked after use. Large amounts of money and valuables should not be brought to school or stored in your locker.

All incoming 7th and 8th grade students will be given a combination padlock for their PE locker. Locks must be school-issued due to matters of school security. School lockers are considered school property and subject to search. Locks that are not school-issued will be removed at the expense of the student. Lost, damaged, or stolen locks must be replaced at the replacement cost.

7th and 8th Grade Students:

- PE locks & lockers will be issued by the PE staff during the first week of school.
- Students are required to lock all personal items in their PE locker upon leaving the locker room.
- Lost or damaged PE locks must be reported to PE staff and a replacement lock will be issued.
- Students may be required to pay for lost or damaged PE locks.
- Students are responsible for making sure their locker is closed & locked before leaving the PE locker room.
- Valuables should be locked in your P.E. locker.
- No food is permitted at any time in the P.E. locker room.
- Aerosol containers (including, but not limited to, Axe body spray, hairspray, deodorant/antiperspirant, etc) are not permitted at any time.
- Unsafe conduct will not be tolerated and will result in disciplinary action.

Student Athletes:

- Grade 5-6 athletes will be issued a locker/lock at the discretion of their coaches.
- Grade 7-8 athletes will use the locker they were assigned at the beginning of the year.

EXPECTATIONS FOR PARENTS OF STUDENT ATHLETES

Parents are encouraged to support their children's athletic endeavors and recognize the importance of athletics in their children's lives.

All parents/guardians are expected to:

- Understand that academics are a priority over athletics and emphasize successful classroom performance.
- Support and be enthusiastic about their child's chosen sport.
- Be positive, helping their child understand the benefits of athletic participation regardless of contest results or individual performance.
- Insist their child abide by expectations of the athletic department and by team rules.
- Encourage fair play.
- Respect the actions of coaches regarding contest strategy, their child's play status and playing time.
- Avoid "coaching" from the stands or sidelines during both games and practices.
- Ensure their child attends all practices and contests, and are picked up promptly at designated times. (The coaching staff appreciates your understanding of the time that is dedicated to student-athletes and the implementation a successful athletic program.)
- All athletes are expected to ride the bus to and from away games. Written permission is necessary prior to the game is needed if parent will transport from child from game. Parents must also sign child out after the game. (see attached form)
- Request meeting with coach to address concerns.

COACH/PARENT COMMUNICATIONS

Student athletes will receive a printed schedule at the beginning of the season. It will also be posted on the school's website calendar. Open Lines of communication are essential because of the many changes that can occur during a season. Announcements and emergency cancellations will be sent to parents via school messenger and a text notification system. Coaches will use REMIND101 for updates and announcements. **It is imperative to have updated contact information.**

INSURANCE

Athletes are covered by the school insurance only during the time they are engaged in a sport, but not during other times of the day or school year. The school insurance is a secondary policy, which will assist in the payment for an injury sustained during practice or a game. Such payments are at the discretion of the insurance carrier and are paid for costs not covered under the family's primary insurer.

PHYSICAL EXAM REQUIREMENTS

Students participating in athletics at the Voluntown Public School System are required to have a current physical examination. A sport physical is valid 13 months, but must include the entire season for the sport in which the student will participate. The completed physical form needs to be in to the school **prior** to the first tryout. Sport physical forms are available in the main office and nurse's office. All questions regarding physicals should be directed to the school nurse.

REPORTING INJURIES

Athletic activity involves the potential for injury. Even with the best coaches, use of the most advanced protective equipment, and strict observance of rules, injuries are still a possibility. On occasion injuries may be so severe as to result in paralysis and total disability.

All injuries that occur while participating in sports must be reported to the coach. It is the responsibility of the injured students parents/guardians to complete a notification of injury report and return to the nurse's office within one week of the date of the injury. A form should be completed for all injuries that may require professional medical attention. Athletes may return to participate upon medical clearance.

CONCUSSION SIGNS, SYMPTOMS, AND PROTOCOLS

All parents and student athletes must read and sign the attached Concussion Education Plan Consent Form to verify that you have reviewed and understand the Concussion Education Plan Summary, Signs and Symptoms of a Concussion: Overview, Return to Play (RTP) Protocol Overview, the severities associated with concussions, and the need for immediate treatment of such injuries. The attached consent form was developed to provide students and parents with current and relevant information regarding concussions and to comply with Connecticut General Statutes (C.G.S.) Chapter 163, Section 149b: Concussions: Training courses for coaches. Education plan. Informed consent form. Development or approval by the State Board of Education and Section 10-149c: Student athletes and concussions. Removal from athletic activities. Notification of parent or legal guardian. Revocation of coaching permit.

Center for Disease Control Concussion Videos ~ <https://www.cdc.gov/headsup/index.html>

[Click on the above link to get to the CDC website.](#)
[Click on the Brain Injury tab to get to the concussion videos.](#)

CRITERIA FOR TEAM SELECTION

The number of students permitted on some teams may be limited due to allowable roster sizes. For these teams a tryout will be conducted. At the tryout, all athletes will be afforded an opportunity to showcase their talents and earn a spot on the roster. Basis for team selection will be at the sole discretion of the coach. Coaches will have in place clear and consistent criteria for the tryout period. Criteria may include, but is not limited to, the following indicators:

- Specific sport skill set
- Position skill relative to other candidates
- Athletic ability
- Effort level
- Team needs-team role feasibility
- Sportsmanship and teamwork
- Physical fitness

At this time, interscholastic athletics are available to 6th, 7th and 8th grade students. Students in the 5th grade may be eligible when we are unable to field a team(s). Students must tryout for teams each year; team selection will be based on selection criteria rather than grade level. It should also be noted that JV and Varsity teams will be determined by ability rather than grade level.

CONFERENCE AFFILIATION

Voluntown Public School System is a member of the SouthEast Middle School Athletic Conference (SEMSAC). The conference consists of the following teams: The league has small and large divisions (based on 6-8 population), for boys' soccer and boys' & girls' basketball.

Soccer

Bozrah (coed)
Lisbon
Preston (coed)
Salem
Sayles
Sterling
Voluntown
Wheeler

Basketball

Bozrah
Franklin
Lisbon
Preston
Salem
Sayles
Sterling
Voluntown
Wheeler

Track

Franklin
Lisbon
Preston
Salem
Sayles
Sterling
Voluntown

Cheerleading

Annual Spirit Competition

ADDRESSES TO AWAY SPORTING EVENTS

Voluntown ~ Voluntown Elementary School, 195 Main Street, Voluntown, CT 06384 ~ 860-376-2325

Bozrah

Fields Memorial School
8 Bozrah Street Extension
Bozrah, CT 06334
Telephone: 860-887-2561

Franklin

Franklin Elementary School
206 Pond Road
North Franklin, CT 06254
Telephone: 860-642-7063

Lisbon

Lisbon Central School
15 Newent Road
Lisbon, CT 06351
Telephone: 860-376-2403

North Stonington

Wheeler Middle School
298 Norwich Westerly Road
North Stonington, CT 06359
Telephone: 860-535-0377

Preston (Soccer)

Present Plains Middle School
Route 164
Preston, CT 06365
Telephone: 860-889-3831

Preston (Basketball)

Preston Veterans Memorial School
325 Shetucket Turnpike
Preston, CT 06365
Telephone: 860-887-3113

Salem

Salem Elementary School
200 Hartford Road
Salem, CT 06420
Telephone: 860-859-0291

Sayles

Sayles School
25 Baltic Road
Scotland, CT 06330
Telephone: 860-822-8264

Sterling

Sterling Community School
251 Sterling Road
Sterling, CT 06377
Telephone: 860-564-2728

EMERGENCY PROCEDURES

Coach is responsible for keeping all athlete information in a binder (student emergency contact information and medical information), which should be brought to every practice and game.

Serious Injury

An athlete who sustains a serious injury at a game or practice:

Coach will immediately tend to athlete. Teammates will stay near the team benches and practice obedience.

Coach will collaborate with parent to determine if ambulance should be called or parent can transport child to Hospital.

If the injury is sustained at an away game and the parent is not in attendance the head coach will notify the parent(s) and the assistant will ride ambulance with the athlete to the hospital. The head coach will remain with the team.

Bus Accident

In case of a Bus Accident, team members must remain under the supervision of the Coaches, until emergency personnel have determined it is safe for students to be dismissed to parents.

Bus Driver will:

Call 911 and Transportation Coordinator. Arrangements will be made for another school bus to go to scene and pick up uninjured athletes.

Head coach will:

Notify administration.

Follow emergency personnel directives.

If necessary, will travel with injured athlete(s) to the hospital and wait while parents are notified according to hospital procedure.

Assistant coaches will:

Stay with team members until the other school bus arrives on the scene to pick up uninjured athletes. Ride bus with athletes.

When appropriate, coordinate athlete sign out (all athletes must be signed out by parent/guardian before leaving premises).

Irate Spectator/Intruder (indoors)

Head coach will:

Call 911 (depending on the circumstances of the incident).

Notify administration.

Assistant coaches will:

Stay with team members in a secure location.

Take note of attendance and report to Head Coach.

In case of Fire (indoors)

All team members will exit the building (through the nearest fire exit) with the Coaches.

Head coach/Assistant coach will:

Stay with team members in a designated meeting spot (in a secure location outside the building).

Take note of attendance.

If necessary, coordinate athlete sign out (all athletes must be signed out by parent/guardian before leaving school premises).

Irate Spectator/Stray Animal (outdoors)

Head coach will:

Call 911 (depending on the circumstances of the incident).

Notify administration.

Assistant coach(es) will:

Sound emergency horn twice.

Stay with all team members in a designated meeting spot (in a secure location inside the building).

Take note of attendance and report to Head Coach.

Coordinate athlete sign out (all athletes must be signed out by parent/guardian before leaving school premises).

Thunderstorms and/or lightning (outdoors)

Seek shelter:

In the gymnasium at home games.

On the bus at away games (or alternate location as determined by the coach).

Student Athlete Participation Form
Voluntown Public School System
Interscholastic Athletics

Student Name: _____ Grade: _____ Date: _____

Contact #1: _____ Phone #: _____ Cell #: _____

Email Address: _____

Contact # 2: _____ Phone #: _____ Cell #: _____

Email Address: _____

1.

I, _____ Grade _____, would like to tryout and/or participate in _____.
(student's name) (sport)

I have read the athletic handbook and agree to abide by all school and athletic policies.

Student's Signature _____ Date _____

2.

I give permission for _____ to participate in tryouts, practice and games, both home and
(student's name)
away during the _____ season.
(sport)

I have read the athletic handout and understand all school and athletic policies.

Parent's Signature _____ Date _____

3.

My records show that _____ has a physical form in my office that is valid through
(student name)
_____.
(date)

Nurse's signature _____ Date _____

4.

I have checked on Academic Eligibility and found that _____ is eligible to participate in
(student's name)
_____.
(sport)

Athletic Director's Signature _____ Date _____

This completed form should be provided to the respective coach, who shall have it at all times.
No participation until all the spaces are completed.

Medical Release
Voluntown Public School System
Interscholastic Athletics

Sport: _____

Student Name: _____ Grade: _____ Date: _____

Address: _____

Parent/Guardian #1: _____ Phone #: _____ Cell #: _____

Email Address: _____

Parent's Employer: _____ Phone: _____

Medical Insurance Co.: _____

Group ID#: _____ Member ID#: _____

Parent/Guardian #2: _____ Phone #: _____ Cell #: _____

Email Address: _____

Parent's Employer: _____ Phone: _____

Medical Insurance Co.: _____

Group ID#: _____ Member ID#: _____

Emergency Contact: _____ Phone: _____

Parent/guardian must notify the school nurse in writing of any changes in the information on this form.

It is understood that payment for medical claims will be processed in the following manner:

- a. Parent/guardian's own health insurance is primary and therefore pays first.
- b. If there is no parent/guardian coverage then the school's sports insurance is primary.

Please sign below:

I hereby authorize my child, _____
to be treated in any emergency through any certified medical program by qualified medical personnel.

(Parent/Guardian signature)

(Date)

Student and Parent Concussion Informed Consent Form
Voluntown Public School System
Interscholastic Athletics

This consent form was developed to provide students and parents with current and relevant information regarding concussions and to comply with Connecticut General Statutes (C.G.S.) Chapter 163, Section 149b: Concussions: Training courses for coaches. Education plan. Informed consent form. Development or approval by the State Board of Education and Section 10-149c: Student athletes and concussions. Removal from athletic activities. Notification of parent or legal guardian. Revocation of coaching permit.

What is a Concussion?

National Athletic Trainers Association (NATA) - A concussion is a “trauma induced alteration in mental status that may or may not involve loss of consciousness.”

Centers for Disease Control and Prevention (CDC) - “A concussion is a type of traumatic brain injury, or TBI, caused by a bump, blow, or jolt to the head that can change the way your brain normally works. Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth.” -CDC, Heads Up: Concussion

http://www.cdc.gov/headsup/basics/concussion_what.html

Even a “ding,” “getting your bell rung,” or what seems to be mild bump or blow to the head can be serious” -CDC, Heads Up: Concussion Fact Sheet for Coaches http://www.cdc.gov/concussion/HeadsUp/pdf/Fact_Sheet_Coaches-a.pdf

Section 1. Concussion Education Plan Summary

The [Concussion Education Plan and Guidelines for Connecticut Schools](#) was approved by the Connecticut State Board of Education in January 2015. Below is an outline of the requirements of the Plan. The complete document is accessible on the CSDE Web site: <http://www.sde.ct.gov/sde/cwp/view.asp?a=2663&q=335572>

State law requires that each local and regional board of education must approve and then implement a concussion education plan by using written materials, online training or videos, or in-person training that addresses, at a minimum the following:

1. The recognition of signs or symptoms of concussion.
2. The means of obtaining proper medical treatment for a person suspected of sustaining a concussion.
3. The nature and risks of concussions, including the danger of continuing to engage in athletic activity after sustaining a concussion.
4. The proper procedures for allowing a student athlete who has sustained a concussion to return to athletic activity.
5. Current best practices in the prevention and treatment of a concussion.

Section 2. Signs and Symptoms of a Concussion: Overview

A concussion should be suspected if any one or more of the following signs or symptoms are present, or if the coach/evaluator is unsure, following an impact or suspected impact as described in the CDC definition above.

Signs of a concussion may include (i.e. what the athlete displays/looks like to an observer):

- Confusion/disorientation/irritability
- Trouble resting/getting comfortable
- Lack of concentration
- Slow response/drowsiness
- Incoherent/ slurred speech
- Slow/clumsy movements
- Loses consciousness
- Amnesia/memory problems
- Acts silly/combative/aggressive
- Repeatedly ask same questions
- Dazed appearance
- Restless/irritable
- Constant attempts to return to play
- Constant motion
- Disproportionate/inappropriate reactions
- Balance problems

Symptoms of a concussion may include (i.e. what the athlete reports):

- Headache or dizziness
- Nausea or vomiting
- Blurred or double vision
- Oversensitivity to sound/light/touch
- Ringing in ears
- Feeling foggy or groggy

State law requires that a coach MUST immediately remove a student-athlete from participating in any intramural or interscholastic athletic activity who: a) is observed to exhibit signs, symptoms or behaviors consistent with a concussion following a suspected blow to the head or body, or b) is diagnosed with a concussion, regardless of when such concussion or head injury may have occurred.

Upon removal of the athlete, a qualified school employee must notify the parent or legal guardian within 24 hours that the student athlete has exhibited signs and symptoms of a concussion.

Student and Parent Concussion Informed Consent Form
Voluntown Public School System
Interscholastic Athletics

Section 3. Return to Play (RTP) Protocol Overview

Currently, it is impossible to accurately predict how long an individual’s concussion will last. There must be full recovery before a student-athlete is allowed to resume participating in athletic activity. Connecticut law now requires that no athlete may resume participation until they have received written medical clearance from a licensed healthcare professional (physician, physician assistant, advanced practice registered nurse (APRN), athletic trainer) trained in the evaluation and management of concussions.

Concussion Management Requirements:

1. No athlete SHALL return to participation in the athletic activity on the same day of concussion.
2. If there is any loss of consciousness, vomiting or seizures, the athlete MUST be immediately transported to the hospital.
3. Close observation of an athlete MUST continue following a concussion. The athlete should be monitored for an appropriate amount of time following the injury to ensure that there is no worsening/escalation of symptoms.
4. Any athlete with signs or symptoms related to a concussion MUST be evaluated by a licensed healthcare professional (physician, physician assistant, advanced practice registered nurse (APRN), athletic trainer) trained in the evaluation and management of concussions.
5. The athlete MUST obtain an initial written clearance from one of the licensed health care professionals identified above directing her/him into a well-defined RTP stepped protocol similar to the one outlined below. If at any time signs or symptoms return during the RTP progression, the athlete should cease activity*.
6. After the RTP protocol has been successfully administered (no longer exhibits any signs or symptoms or behaviors consistent with concussions), final written medical clearance is required by one of the licensed health care professionals identified above for the athlete to fully return to unrestricted participation in practices and competitions.

Medical Clearance RTP protocol (recommended one full day between steps)

Rehabilitation stage	Functional exercise at each stage of rehabilitation	Objective of each stage
1. No activity	Complete physical and cognitive rest until asymptomatic. School may need to be modified.	Recovery
2. Light aerobic exercise	Walking, swimming or stationary cycling maintaining intensity ,<70% of maximal exertion; no resistance training	Increase Heart Rate
3. Sport specific exercise No contact	Skating drills in ice hockey, running drills in soccer; no head impact activities	Add Movement
4. Non-contact sport drills	Progression to more complex training drills, ie. passing drills in football and ice hockey; may start progressive resistance training	Exercise, coordination and cognitive load
5. Full contact sport drills	Following final medical clearance, participate in normal training activities	Restore confidence and assess functional skills by coaching staff
6. Full activity	No restrictions	Return to full athletic participation

* If at any time signs or symptoms should worsen during the RTP progression the athlete should stop activity that day. If the athlete’s symptoms are gone the next day, she/he may resume the RTP progression at the last step completed in which no symptoms were present. If symptoms return and don’t resolve, the athlete should be referred back to her/his medical provider.

Section 4. Local/Regional Board of Education Policies Regarding Concussions

***** Attach local or regional board of education concussion policies *****

References:

1. NFHS. Concussions. 2008 NFHS Sports Medicine Handbook (Third Edition). 2008: 77-82. <http://www.nfhs.org>. http://journals.lww.com/cjsportsmed/Fulltext/2009/05000/Consensus_Statement_on_Concussion_in_Sport_3rd.1.aspx.
2. Centers for Disease Control and Prevention. Heads Up: Concussion in High School Sports. http://www.cdc.gov/NCIPC/tbi/Coaches_Tool_Kit.htm.
3. CIAC Concussion Central. <http://concussioncentral.ciacsports.com/>

Resources:

- Centers for Disease Control and Prevention. Injury Prevention & Control: Traumatic Brain Injury. Retrieved on June 16, 2010. <http://www.cdc.gov/TraumaticBrainInjury/index.html>
- Centers for Disease Control and Prevention. Heads Up: Concussion in High School Sports Guide for Coaches. Retrieved on June 16, 2014.

Student and Parent Concussion Informed Consent Form
Voluntown Public School System
Interscholastic Athletics

STUDENT ATHLETES:

I have read and understand this document the “Student and Parent Concussion Informed Consent Form” and understand the severities associated with concussions and the need for immediate treatment of such injuries.

Student name: _____ Date _____ Signature _____
(Print Name)

PARENT/GUARDIAN(S) OF STUDENT ATHLETES:

I have read and understand this document the “Student and Parent Concussion Informed Consent Form” and understand the severities associated with concussions and the need for immediate treatment of such injuries.

I authorize my child to participate in _____ for school year _____.
(Sport/Activity)

Parent/Guardian name: _____ Date _____ Signature _____
(Print Name)