For official use only:
Name of Athlete_____
Sport/season_____
Date Received_____

Concussion Awareness and Sudden Cardiac Arrest Awareness
Parent/Student Athlete Acknowledgement Statement

Parent/Guardian

I acknowledge that I have read and understand the following:

- **Sudden Cardiac Arrest (SCA) Information Sheet**
- **Concussion Awareness Information Sheet**

_____ _____ Date _____
PRINT NAME **PARENT/GUARDIAN SIGNATURE**

Student Athlete

I acknowledge that I have read and understand the following:

- **Sudden Cardiac Arrest (SCA) Information Sheet**
- **Concussion Awareness Information Sheet**

_____ _____ Date _____
PRINT NAME **STUDENT ATHLETE SIGNATURE**