



# SOUTH SHORE CHARTER PUBLIC SCHOOL

*Inspiring every student to excel in academics, service, and life*

## SSCPS ATHLETICS

### STUDENT AND PARENT EDUCATION REQUIREMENT SPORTS RELATED HEAD INJURY and CONCUSSIONS

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
Fall Sport: \_\_\_\_\_ Winter Sport: \_\_\_\_\_ Spring Sport: \_\_\_\_\_

The Commonwealth of Massachusetts Executive Office of Health and Human Services requires that all schools subject to the Massachusetts Charter School Athletic Organization (MCSAO) rules adhere to a law that states that student-athletes and their parents, coaches, athletic directors, school nurses, and physicians must learn about the consequences of head injuries and concussions through training programs and written materials. The law requires that athletes and their parents inform their coaches about prior head injuries at the beginning of the season. If a student athlete becomes unconscious, or suspected of having a concussion, during a game or practice, the law now mandates taking the student out of play or practice, and requires written certification from a licensed medical professional for gradually resuming of athletics.

**Parents and students who plan to participate in any athletic program at South Shore Charter Public School are required to take a training program regarding concussions.** A free online program is available through the Centers for Disease Control and Prevention and contains all the information required by the law:

<http://www.cdc.gov/concussion/HeadsUp/Training/index.html>

Therefore, by signing below, you and your child/student/athlete have read the policy regarding sports related head injuries/concussions in the athletic handbook and completed the CDC online training program. **It is required that this form be completed and submitted along with the course completion receipts for both student and parent to the Athletic Office or to the team coach prior to tryouts or practices for a sport. No student may participate on any athletic team at South Shore Charter Public School without completing this form.**

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date