

CONCUSSION POLICY for SPORTS

Student Name:	Grade:
In accordance with GA HB 284 (The Return to Play student athletes, St. John the Evangelist Catholic effective August 1, 2013.	Act of 2013) and to ensure the safety of our School will institute the following requirements
 Prior to the beginning of each athletic seaso legal guardians of the risk of concussions m 	n, an information sheet informing parents and just be provided.
 If a young athlete (ages 7-18) participating is concussion, he/she must be removed from pevaluated by a healthcare provider. 	n a youth athletic activity exhibits symptoms of a play, practice, competition or tryout and
 Any youth who is deemed by a healthcare presented to return to play until he/she recently full or graduated return to play. 	rovider as sustaining a concussion shall not be eives clearance from a healthcare provider for a
• Use of special equipment (helmets, mouth g to parental/legal guardian discretion.	uards, etc.) will be recommended by SJE but left
It is the policy of St. John the Evangelist Catholic Sin activities until this form is signed and returned. have received and read the fact sheet on concussion	By signing this form, you acknowledge that you
STUDENT ATHLETE'S SIGNATURE	DATE
Parent/Guardian Name signature	PARENT/GUARDIAN NAME (PRINTED)
ONLY ORIGINAL SIGNATURES WILL BE ACCEPTED. NO FA	AXED OR ELECTRONICALLY RECEIVED PERMISSION
St. John the Evangelist School • 240 Arnold Stre	et • Hapeville, GA 30354 • 404-767-4312