St. Bernadette School Athletic Concussion Form

Student Name: _		Grad	e:
Sport:			
	*This form must be compl	eted each season per sport	
Massachusetts have participate in the I awareness program "Concussion in Space can be four required to particiany athletic scrimes."	ve recently mandated that a National Federation of Staten. This program consists of Ports – What You Need Tond at www.nfhslearn.com a pate in this online course. I	etes participating in Athleticall student/athletes, as well as the High School Association's of an online concussion aware Know," and corresponding and is free. All students and I No student will be allowed to the Bernadette School without	s parents, must s concussion reness course, exam. The Parents will be to participate in
Concussion in Sporegarding signs, several other frequestions please for School at 508-351	orts." This packet will prove symptoms, return to play, he uently asked questions rega- eel free to contact Russ Har- 9905 or email at rharris@	_	ry information shool work, and further
Detail any concu	ssion history:		
• Go • Cli • Th • Foi • Afi exa	to www.nfhslearn.com ck on "Concussion in Sporte Website will ask you to relate the completing both the online, please sign, date and related to the completing both the online, please sign, date and related to the completing both the online, please sign, date and related to the completing both the online, please sign, date and related to the completing both the online, please sign, date and related to the completing both the online, please sign, date and related to the completing both the online, please sign, date and related to the completing both the online to the completing both	ts – What You Need To Kno egister prior to taking the exa	ow" nm. orresponding Student
	natures certify that both studen in Sports – What You Ne	dent and parent have comple ed to Know"	ted the online
Parent	Date	Student	Date

Print Name

Print Name