

Parent/Guardian Acknowledgement Form



CIF Southern Section Bylaw 503.H, 503.J, 503.K.(1), and Ed Code 49476 state that both students and parents must review information provided by the school related to **concussion**, **sudden cardiac arrest**, **heat illness**, **and opioid use and misuse** and sign stating that they have reviewed and understand the material before the athlete's initial practice or competition. This form may be used to acknowledge receipt and understanding of all four mandated elements.

Student Name:		School Name:
Grade:	Sport(s):	·
Concussion Awaren	<u>ess</u>	
_	and the importance of r	ved information regarding the signs, symptoms, and risks of eporting symptoms and following proper medical protocols
Parent/Guardian Initia	als:	Student Initials:
Sudden Cardiac Arre	est Awareness	
_		red information about sudden cardiac arrest, including te action and medical evaluation.
Parent/Guardian Initia	als:	Student Initials:
	ave received and review	red information on heat-related illnesses, including ortance of hydration and acclimatization.
Parent/Guardian Initia	als:	Student Initials:
Opioid Use and Misu	use Education	
_		red information on the risks of opioid use and misuse, ddiction, and available resources for help.
Parent/Guardian Initia	als:	Student Initials:
four topics listed above	ifirm that I have read, ur	nderstood, and agree with the information provided on all e of these health and safety issues and agree to support my otocols.
Parent/Guardian Nam	e (Print):	Student Name (Print):
Parent/Guardian Signa	ature:	Student Signature:
Date:		Date: