

PETERS TOWNSHIP SCHOOL DISTRICT CONCUSSION MANAGEMENT PROGRAM AWARENESS FORM

As required in Peters Township School District Policy # 5143 AR-1, the Peters Township Athletic Department will offer parents and student athletes a preseason informational meeting on baseline ImPACT testing, updated knowledge about concussions as a mild traumatic brain injury (TBI), treatment, management, and common signs and symptoms of a concussion. All parents, coaches, and student athletes are strongly encouraged to attend this informational meeting.

Annually, prior to trying out for a sport, all parents and student athletes are required to participate in and document having successfully completed one of the options below, in order for the athlete to practice or play. Information is also online at: www.ptsd.k12.pa.us/ConcussionInformation.aspx

Please sign and return this page after successfully completing one of the following:

- **OPTION A** - Attend the preseason informational concussion meeting organized by the School District or a local school district.

_____ Parent Name	_____ Signature	_____ Date
_____ Athlete Name	_____ Signature	_____ Date
_____ Location	_____ Date	

- **OPTION B** - Review all information pertaining to concussions provided by the School District (Information will be posted on the website and will include video of the preseason informational concussion meetings. Video access is password protected and is available by contacting the Athletic Office).

_____ Parent Name	_____ Signature	_____ Date
_____ Athlete Name	_____ Signature	_____ Date

- **OPTION C** - Take an approved educational course on concussions (Links to course options can be found on the district website).

_____ Parent Name	_____ Signature	_____ Date
_____ Athlete Name	_____ Signature	_____ Date
_____ Name of Course	_____ Date	