



**Concussion and Traumatic Head Injury Policy Parental
Acknowledgment Form**

In compliance with Utah Code § 26-53-101 *et seq.*, this acknowledgment form is to confirm that you have read and understand the Concussion and Traumatic Head Injury Information Sheet and the City’s Concussion and Traumatic Head Injury Policy provided to you by the City related to potential concussion and traumatic head injuries occurring during participation in sporting events.

I, _____ (*name of parent/guardian*) as parent/guardian of _____ (*name of player*), have read the information material provided to us by the City related to concussion and traumatic head injuries occurring during participation in sporting events and understand the content, responsibilities, and warnings therein.

I understand that if my child sustains a concussion, it is my responsibility to return a completed Qualified Health Care Provider Statement Authorizing Player to Resume Play form to Nibley City Hall. (This form can be downloaded at www.nibleycity.com or picked up at Nibley City Hall.)

By signing below, I acknowledge that I have read and understand the Concussion and Traumatic Head Injury Information Sheet and the Concussion and Traumatic Head Injury Policy, and that I agree to abide by the City’s Concussion and Traumatic Head Injury Policy.

SIGNATURE OF PARENT/GUARDIAN

DATE

PLAYER: _____

DOB: _____

Note: The acknowledgment form above is included in the registration for all sports and recreation activities and may be signed in person or electronically.