

# CONCUSSION AWARENESS

## EDUCATIONAL MATERIAL ACKNOWLEDGEMENT FORM

By my name and signature below, I, ***THE PARENT/GUARDIAN OF THE STUDENT NAMED BELOW***, acknowledge in accordance with Public Acts 342 and 343 of 2012 that ***my student and I*** have received and reviewed the *Educational Material for Parents and Students – Understanding Concussion* document provided by ***BIRMINGHAM PUBLIC SCHOOLS***.

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Student's Name Printed Parent's/Guardian's Name Printed

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Parent's/Guardian's Signature

Date

***Return this signed form to your STUDENT'S SCHOOL that must keep this form on file for the duration of participation or age 18.***

***Parents/Guardians, please be sure you have reviewed the educational materials with your student and keep the educational material available for future reference.***