Clovis Clash Youth Football & Cheer

**Mild Traumatic Brain Injury (MTBI) / Concussion

Annual Awareness & Acknowledgment Form**

I, the undersigned parent or legal guardian of a participant in **Clovis Clash Youth Football & Cheer, Inc.**, acknowledge that participation in football and cheer activities involves the risk of **mild traumatic brain injury (MTBI) and concussion**. I understand that both the athlete and parent/guardian play an active role in maintaining the athlete's health and safety.

Concussion Education & Awareness

I acknowledge that Clovis Clash has made available concussion education materials, including the **CDC "HEADS UP" Concussion Fact Sheets for Parents and Athletes** (https://www.cdc.gov/HEADSUP).

I acknowledge that:

- I have been provided access to concussion education materials (Link Above)
- I have had the opportunity to review these materials and ask questions
- I understand that concussion fact sheets differ for parents, athletes, and coaches

Health Disclosure & Reporting Responsibility

I understand and agree that:

- I am responsible for providing accurate and complete medical information regarding my child's health
- I will disclose any **prior, current, or future injuries, illnesses, symptoms, or medical conditions**, including previous concussions
- A concussion is a **brain injury** and must be reported immediately to a

Clovis Clash coach, board member, volunteer, or program staff

I understand that concussion symptoms:

- May appear immediately or hours or days after the injury
- May affect reaction time, balance, coordination, sleep, mood, behavior, and academic performance

I further understand that if I suspect another athlete has sustained a concussion, I am responsible for reporting it to program staff.

Removal From Participation & Return-to-Play

I understand and agree that:

- Any athlete suspected of sustaining a concussion or head injury **will be removed from participation immediately**
- My child **will not return to practice, games, or events** until:
  - All concussion-related symptoms have fully resolved, **AND**
  - Written medical clearance is provided by a **qualified healthcare professional**
- Returning to participation before full recovery significantly increases the risk of **repeat concussion, serious injury, permanent brain damage, or death**

Long-Term & Cumulative Head Injury Risks

I acknowledge that participation in contact and collision sports, including football and cheerleading, may involve **repetitive head impacts** that could result in **long-term or permanent neurological conditions**, including but not limited to **chronic traumatic encephalopathy (CTE)**.

I understand that:

- The long-term effects of repeated head impacts are still being studied
- Symptoms of neurological injury may not appear until **years later**
- No helmet, rule, or safety protocol can completely eliminate these risks

High-Risk Sports Acknowledgment

I understand that football and cheerleading are identified by the CDC as sports with an **increased risk of concussion and head injury**, along with other contact and collision activities.

Acknowledgment & Agreement

I represent and certify that:

- I have read and fully understand this **MTBI / Concussion Awareness & Acknowledgment**
- I understand the risks, responsibilities, and safety requirements outlined above
- I agree to comply with all Clovis Clash concussion management, safety, and return-to-play protocols

If completed electronically, I understand this acknowledgment constitutes my **electronic signature** and is legally binding.