

#### ATHLETE INFORMATION SHEET ATHLETE INFORMATION MI First Name Last Name State Zip Address City Family Email Address Home Phone Athlete's Email Address Athlete's Cell Phone Position School Sport **Graduation Year** Birthdate Age **Mother's Contact Information Father's Contact Information** Name (Last, First) Name (Last, First) Address (If different from above) Address (If different from above) Email Email Work Phone Work Phone Cell Phone Cell Phone Agreement/Waiver **Additional Information** 1. Any special health and physical considerations: assume all risks and hazards incidental to such participation, including risk of serious injury, and do hereby release and waive all claims against Strictly 2SP LLC, it's officers, directors, coaches, sponsors and volunteers and other participants. I further grant permission for emergency first aid to be given to my child in case of injury. I certify that the above information is correct and been 2. Is the athlete training or practicing anywhere else? If so, thoroughly read. when/where? I agree to the above paragraph and certify that all information is filled in correctly on this form. 3. Would you like to be added to our email list to receive events and updates? 4. How did you hear about 2SP? Signature of Parent or Guardian Date

2SP SPORTS PERFORMANCE 29235 Stephenson Highway, Madison Heights, MI 48071 248.397.8945 contactus@2spsports.com

www.2spsports.com



### Release, Waiver of Liability, and Covenant Not To Sue

The undersigned hereby acknowledges that participation in athletic training programs that involves an inherent risk of physical injury and assumes all such risks. The undersigned hereby agrees that for the sole consideration of Strictly 2SP, LLC allowing the undersigned to participate in voluntary programs or athletic activities in connection there with, and making available to the undersigned for his use while participation in such programs or activities, certain equipment, facilities, grounds, or personnel of Strictly 2SP, LLC, the undersigned participant does hereby waive liability, release and forever discharge Strictly 2SP, LLC, its members individually, its officers, agents, or employees from any and all demands, rights, and causes of action of whatever kind or nature arising out of all known and unknown, foreseen and unforeseen bodily and personal injuries, damage to property, and consequences thereof, including death, resulting from my voluntary participation in or in any way connected with such programs and athletic activities.

I further covenant and agree that for the sole consideration stated above I will not sue Strictly 2SP, LLC, its members individually, its officers, agents, or employees for any claim for damages arising or growing out of my voluntary participation in programs or athletic activities.

I understand that the acceptance of this Release, Waiver of Liability, and Covenant Not To Sue Strictly 2SP, LLC directly or any agent or employee thereof, shall not constitute a waiver, in whole or in part, of sovereign or official immunity by said board, its members, officers, agents, and employees.

I certify that I am \_\_\_\_\_ years of age and suffering under no legal disabilities and that I have read the above carefully before signing.

If one of these paragraphs is deemed void by the court it will not affect the validity of any other paragraph.

| Print Name (Athlete):                                  |          |  |
|--|----------|--|
| Date:  |          |  |
| Signature of Athlete, (Parent or Guardian if under 18) | <i>P</i> |  |
| Print Name:  |          |  |

# PARENT & ATHLETE CONCUSSION INFORMATION SHEET



A concussion is a type of traumatic brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head or body that causes the head and brain to move quickly back and forth. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

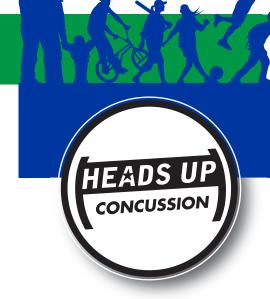


Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury.

If an athlete reports one or more symptoms of concussion after a bump, blow, or jolt to the head or body, s/he should be kept out of play the day of the injury. The athlete should only return to play with permission from a health care professional experienced in evaluating for concussion.

#### **DID YOU KNOW?**

- Most concussions occur without loss of consciousness.
- Athletes who have, at any point in their lives, had a concussion have an increased risk for another concussion.
- Young children and teens are more likely to get a concussion and take longer to recover than adults.



## SYMPTOMS REPORTED BY ATHLETE:

- · Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- · Sensitivity to light
- Sensitivity to noise
- · Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not "feeling right" or is "feeling down"

### SIGNS OBSERVED BY COACHING STAFF:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall





"IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON"

#### **CONCUSSION DANGER SIGNS**

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. An athlete should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- · Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- · Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously)

## WHAT SHOULD YOU DO IF YOU THINK YOUR ATHLETE HAS A CONCUSSION?

- 1. If you suspect that an athlete has a concussion, remove the athlete from play and seek medical attention. Do not try to judge the severity of the injury yourself. Keep the athlete out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says s/he is symptom-free and it's OK to return to play.
- 2. Rest is key to helping an athlete recover from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, and playing video games, may cause concussion symptoms to reappear or get worse. After a concussion, returning to sports and school is a gradual process that should be carefully managed and monitored by a health care professional.
- 3. Remember: Concussions affect people differently. While most athletes with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

## WHY SHOULD AN ATHLETE REPORT THEIR SYMPTOMS?

If an athlete has a concussion, his/her brain needs time to heal. While an athlete's brain is still healing, s/he is much more likely to have another concussion. Repeat concussions can increase the time it takes to recover. In rare cases, repeat concussions in young athletes can result in brain swelling or permanent damage to their brain. They can even be fatal.

| STUDENT-ATHLETE NAME PRINTED    |
|---------------------------------|
| STUDENT-ATHLETE NAME SIGNED     |
| DATE                            |
|                                 |
| PARENT OR GUARDIAN NAME PRINTED |
| PARENT OR GUARDIAN NAME SIGNED  |
| DATE                            |

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HEADS UP

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