

East Martin Christian School

Concussion Awareness

Educational Material Acknowledgement Form

By my name and signature below, I acknowledge in accordance with Public Acts 342 and 343 of 2012 that I have received and reviewed the Concussion Fact Sheet for Parents and Students provided by East Martin Christian School.

Student Name Printed

Parent/Guardian Name Printed

Student Name Signature

Parent/Guardian Signature

Date

Date

Return this signed form to the East Martin Christian School office. The school must keep this form on file for the duration of enrollment/participation and until age 25.

Students and parents should review and keep the educational materials available for future reference.

Please return to school as soon as possible.