



City of Othello

Parks and Recreation

111 N. Broadway Avenue, Othello, WA 99344 | P (509) 331-2757 | F (509) 488-3701 | www.othellowa.gov

For official use only:

Name of Athlete _____

Sport/season _____

Date Received _____

Concussion Awareness and Sudden Cardiac Arrest Awareness Parent/Student Athlete Acknowledgement Statement

Parent/Guardian

I acknowledge that I have read and understand the following:

- Sudden Cardiac Arrest (SCA) Information Sheet
- Concussion Awareness Information Sheet

PRINT NAME

PARENT/GUARDIAN SIGNATURE

Date

Student Athlete

I acknowledge that I have read and understand the following:

- Sudden Cardiac Arrest (SCA) Information Sheet
- Concussion Awareness Information Sheet

PRINT NAME

STUDENT ATHLETE SIGNATURE

Date