



# THE WOODWARD SCHOOL ATHLETIC DEPARTMENT

## Pre-Participation Head Injury/Concussion Reporting Form for Extracurricular Athletic Activities

This form should be completed by the student's parent(s) or legal guardian(s). Please **submit this form to the Athletic Director, Bob Giordano, [bgordano@thewoodwardschool.org](mailto:bgordano@thewoodwardschool.org), prior to the start of each season** a student plans to participate in an extracurricular athletic activity.

### Student Information

Student's name	Gender	Date of birth	Grade
Parent/Guardian Name:	Phone number:		
Student's Home Address:	Sport(s):		

**Has student ever experienced a traumatic head injury (a blow to the head)?** Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, when? Dates (month/year):

**Has student ever received medical attention for a head injury?** Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, when? Dates (month/year):  
  
If yes, please describe the circumstances:

**Was student diagnosed with a concussion?** Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, when? Dates (month/year):

How long did symptoms last for the most recent concussion? (i.e., headache, difficulty concentrating, fatigue)

**If yes, was the student cleared by a medical professional since the reported concussion occurred?** Yes \_\_\_\_\_ No \_\_\_\_\_

**IMPORTANT:** If student has had a concussion, clearance by a medical profession is **REQUIRED**. Students will NOT be permitted to participate without adequate medical clearance.

Please attach documentation to this form or submit to the Athletic Director. Post Sports-Related Health Injury Medical Clearance and Authorization Form may be found on our website, [www.thewoodwardschool.org](http://www.thewoodwardschool.org), under Student Info > > Back to School Info >> Wildcats Athletics

Parents who would like a Baseline Concussion Screening may do so by visiting Convenient MD Urgent Care (Locations: Quincy, Weymouth, Dedham, or Pembroke). Walk In appointments welcome. The cost is typically \$10.

It is important for parents and students to learn the signs, symptoms, and dangers of sports-related head injuries and the elements of a safe return to play. **Any student who participates in an extracurricular school activity and their parent or legal guardian must take the DPH-approved annual training every year.** FREE Online DPH approved trainings can be found at: <https://www.mass.gov/service-details/concussion-trainings>

*\*NOTE: There are multiple options listed. You are only required to complete ONE of these*

**(Please Check)** \_\_\_\_\_ I certify that the individuals signed below have taken a DPH approved training

Parent/Guardian (PRINT NAME):	SIGNATURE:	Date:
Student Athlete (PRINT NAME):	SIGNATURE:	Date:

