

## **Poynette Panther Youth Sports Association– Cheerleading**

### **Concussion, Head Injury and Cardiac Arrest Information**

I acknowledge that I read the concussion, head injury and sudden cardiac arrest information sheet provided by the Wisconsin Department of Public Instruction and the Wisconsin Interscholastic Athletic Association. I understand what a concussion is and how it may be caused. I understand the common signs, symptoms and behaviors of a concussion. I understand that the Poynette Cheer coaches will remove athletes from practice, game, or performance if the athlete falls and hits their head or coaches suspect a concussion. I understand that athletes' emergency contact(s) will be notified if coaches suspect a concussion with their athlete. I understand that it is my responsibility to seek medical treatment if a suspected concussion is reported to me and is recommended that your athlete seeks medical attention. I understand that my athlete cannot participate in any cheer related event (practice, games, competitions, etc.) until Poynette Cheer coaches are provided with written clearance from the athletes health care provider. I understand concussions can have a serious effect on a young, developing brain and needs to be addressed correctly.

[Wi DPI Concussion / Cardiac Arrest Information](#)

[WIAA Concussion/ Cardiac Arrest Information](#)

**\*\* As agreed on in the Poynette Cheer registration forms\*\***