



# WAYLAND UNION SCHOOLS

H O M E O F T H E W I L D C A T S

## CONCUSSION AWARENESS EDUCATIONAL MATERIAL ACKNOWLEDGMENT 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 /or the Concussion Fact Sheet for Students provided by Wayland Union Schools.

\_\_\_\_\_  
Participant Name-Printed

\_\_\_\_\_  
Parent/Guardian Name-Printed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

Graduation Year: \_\_\_\_\_

Wayland Union Schools must retain signed Educational Material Acknowledgement Form on file for the duration of student's participation or age 18.

Participants and parents/guardians: Please review and retain educational materials for future reference.