

State of New Jersey

Department of Education Parental Sign off Sheet

School _____

We acknowledge that we have received and reviewed the Sudden Cardiac Death in Athletes Pamphlet.

We acknowledge that we have received and reviewed the Concussion Policy Pamphlet.

We acknowledge that we have received and reviewed the Eye Safety For Athletes Pamphlet.

We acknowledge that we have received and reviewed The Opioid Use and Misuse Educational Fact Sheet.

Student Signature: _____

Print Name: _____

Parent/Guardian

Signature: _____

Print Name: _____

Date: _____

Please return to coach.