



**CONCUSSION UNDERSTANDING AGREEMENT /
 PLAYER MEDICAL AND LIABILITY RELEASE AGREEMENT FORM
 2018 SVBC 18th Annual Tournament (Due by Sept. 10, 2018)**

Instructions: This waiver form* must be returned to **your Division Coordinator** by the due date

1. or at least 15 minutes before your first game.
2. All parent(s)/guardian(s) must sign this waiver form in order to be eligible to participate in this tournament.
3. Please submit this form only when fully completed.
4. For any forms, either soft copy via email or hard copy via mail to your Division Coordinator is acceptable.

It is clearly understood by the undersigned applicant(s) and his/her parent(s) and/or guardian(s) that the Silicon Valley Basketball Club (SVBC), its officers and members, coaches, officials and volunteers, and the Tournament/Jamboree locations - San José Unified School District, Santa Clara Unified School District, Los Gatos-Saratoga Union High School District and all other organizations providing facilities shall not be liable for any injury or loss sustained by the players while playing, practicing, traveling and participating in the SVBC Tournament/Jamboree and sponsored-activities to be held on **September 15-16, 2018**

IMPORTANT INFORMATION REGARDING CONCUSSION

On January 1, 2012, AB-25, a new law on youth sports concussions took effect in California. The law was signed by Governor Brown on October 4, 2011. The law has several provisions which impacts youth sports:

- ❖ Education: In order to participate in athletics, student and a parent or guardian must sign and return to the student’s school/program each year a form acknowledging receipt and review of a concussion and traumatic brain injury information sheet.
- ❖ Suspected concussion: Athletes suspected of having sustained a concussion must be immediately removed from play. Once a supervising referee/umpire, coach/assistant coach or facility coordinator determines that a player should be removed from a game based on a suspected or potential concussion or head injury, no other individual may overrule the determination.
- ❖ Written medical clearance: Athletes who have been removed may not return to play until evaluated and received written clearance from a licensed health care provider trained in the management of concussion acting within the scope of his/her practice.
- ❖ The signing of this CONCUSSION UNDERSTANDING AGREEMENT FORM / PLAYER MEDICAL AND LIABILITY RELEASE AGREEMENT FORM (hereafter referred to as this Agreement) acknowledges the parent(s) or guardian(s), player(s), and their organization received information regarding concussion. We understand that during the SVBC Tournament, Jamboree, and related sponsored-activities, if there is a question of a concussion, the provisions of AB-25 will be implemented.
- ❖ The signing of this Agreement shall be considered a waiver of any claim for such injury or loss.
- ❖ The signing of this Agreement authorizes the SVBC to obtain medical treatment and services for a player when the parent(s) or legal guardian(s) are not present, and the parent(s) or legal guardian(s) agree to pay the fees and costs of such treatment and services.
- ❖ The signing of this Agreement holds responsible the parents(s) or legal guardian(s), player(s), and their participating organization for any damages caused by their child or player(s) to the gym sites or hotels.

Organization/Team Name: _____ **Division/Grade:** _____ **Boys/Girls**

Contact Person: _____ **E-Mail:** _____

Address: _____ **City:** _____ **Zip:** _____

Phone #: Cell: _____ **Home:** _____

	Player Name	Parent/Guardian Signature	Telepone #	Date
1				
2				
3				
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12				