

### ***Concussion Management Policy***

PAYS recognizes that concussions and head injuries are the most commonly reported injuries in children and adolescents who participate in sports and recreational activity. Therefore, PAYS adopts the following policy and guidelines to assist in the proper evaluation and management of head injuries.

Concussion is a mild traumatic brain injury. Concussion occurs when normal brain functioning is disrupted by a blow or jolt to the head. Recovery from concussion will vary. Avoiding re-injury and over-exertion until fully recovered are the cornerstones of proper concussion management.

Any athlete demonstrating signs, symptoms or behaviors consistent with a concussion while participating in a PAYS sponsored activity shall be removed from the game or practice and be evaluated as soon as possible by an appropriate health care professional. PAYS coaches should notify the athlete's parents or guardians and recommend appropriate monitoring to parents or guardians. The athlete should not return to practice or games until released by an appropriate health care professional. PAYS coaches will require a note from the athlete's doctor before allowing the athlete to return to games and/or practices. Any athlete who continues to have signs or symptoms upon return to activity must be removed from play and reevaluated by the health care provider.

### ***INJURY WAIVER***

#### **INJURY AND LIABILITY WAIVER CONSENT**

I hereby represent that I am the parent or legal guardian of the child being registered. In return for my child's opportunity to participate in activities organized by the Plympton Athletic Youth Sports (PAYS), I do hereby exempt and release PAYS, its officers, and its volunteers and officials from any and all liability, claims, demands or actions whatsoever arising out of any damage, loss or injury that my child or I might sustain while my child is participating in PAYS organized activities, whether or not such damage, loss or injury results from the negligence of PAYS, its officers, volunteers or officials or from any defective equipment.

PAYS does not provide medical or other insurance for participants, nor are volunteers trained by the league to administer medical care. I recognize that I, not PAYS, am responsible for all of my child's medical insurance and expenses. I further acknowledge that I, as the parent or legal guardian, am solely responsible for consulting with medical professionals to determine if my child's health is adequate to participate in PAYS practices and games.

I understand that PAYS encourages me to be present during practices and games. If I am absent, I hereby give my consent for PAYS volunteers to act for me according to their best judgment in any emergency situation requiring medical attention. I hereby release, discharge, indemnify, and hold harmless PAYS and its volunteers from any and all liability, for injuries or illnesses incurred while participating in PAYS activities. I understand and assume hazards associated with this activity and waive all claims against PAYS.

I understand that if I do not agree to this release, then I will not be able to register my child to participate in the PAYS league. I have read the above and agree to these conditions.