

MRS. LOPEZ'S WEEKLY MESSAGE

Upcoming Dates

August 30 ~ HSA Meeting
6pm and Fall Festival
Meeting 7pm

September 1 ~ Fall Picture
Day (School uniforms
only)

September 2 ~ 8:15 am
Mass/ Noon Dismissal

September 5 ~ Labor Day;
No School

September 9 ~ 8:15 am
Mass

September 10 ~ 9 am- 11
am School Advisory
Council Meeting in STEM
Lab; 9 am- 12 pm
Protecting God's Children
Training

September 16 ~ 8:15 am
Mass

September 23 ~ 8:15 am
Mass; 12pm-3pm Dance-a-
thon

Severe Weather Situations

In cases of severe weather,
please remember that SLCS
follows the decision made by
the School District of Palm
Beach County for school
closing.

www.stlukespartans.com
561.965.8190

Dear St. Luke Families,

Thank you so much for joining us
this past week at our Back to
School Night. It was great seeing
so many of you on our campus.
We hope that you had an
opportunity to sign up and
volunteer at St. Luke for this
school year. Thank you so much
for all those that helped with our various passport stops that were set
up throughout the Parish Center.



Now that we are in full swing and back to school, I wanted to share
some tips for a productive school year. Try to practice these regularly
to guarantee a successful school year.
Set routines and practice them. Go to bed and wake up at the same
time each day. Ensure that your child read daily for 20 minutes and
set a quiet area and time each night to complete homework.
Talk frequently about goals with your child and how school is going to
help them achieve these goals. This will set purpose for attending
school and will help develop a sense of ownership over their
education. Practice your faith as a family by praying at meals, before
bedtime, and attending Mass together on Sundays.

Stay connected with us by following us on Facebook, Twitter, and
Instagram. Wishing you a great week!

Blessings,
Mrs. Lopez



Kona Ice



Kona Ice Food Truck will be here after school this school year at our first Friday noon dismissal days. Families are welcomed to purchase a frozen treat on these days. A portion of all sales are contributed back to our school.



Did you know...

...that St. Luke Church has family Mass every Sunday at 9am? Students from our school participate in the liturgy as altar servers, lectors, ushers, and tech crew. Donuts are also served after Mass in the St. Luke Family Life Center.

...that St. Luke teachers enrich their faith by viewing the *Going Deeper* video series?

Sports Forms

If your child will be participating in any sport, we need the appropriate forms prior to participation. All athletes are required to submit a sports physical forms and the concussion form. Attached to this newsletter you will find both the physical evaluation and concussion forms. Remember, your child's physician will need to complete the physical forms. Our policy: No forms- no practice-no games.

www.stlukespartans.com
561.965.8190

Protecting God's Children/Virtus

As a reminder, the Protecting God's Children Class will be held on Saturday, September 9th (English) and Saturday, September 24th (Spanish). It is very important that all parents who plan to volunteer at the school complete this class. If you participated in the past, you do not have to do it again. This is a one-time training. In order to register, follow these instruction:

1. Go to www.diocesepb.org
2. On right hand side, Click on "Safe Environments"
3. On left hand side, Click on "Virtus Training"
4. A screen will come up listing all upcoming workshops, be sure to click on St. Luke Saturday, September 10 (English) or September 24 (Spanish) 9am-12pm.
5. Attendee simply clicks on "START REGISTRATION" and completes the registration from there.



Cross Country for grades 6-8 with Coach Bacchus

Practices - Beginning August 29th, every Monday, Tuesday and Thursday from 3:30pm to 4:15pm.

Meets - Wednesdays: September 7th, September 14, September 21, September 28, October 5, October 12th and Championship on October 19th.

*All meets are at Cardinal Newman High School and begin at 6 p.m.

JV Volleyball with Coach Sargent

Our first game is this Wednesday at 4pm at St. Ann Catholic School. Please remember that all forms have to be returned by Tuesday in order to receive your uniform.

Volunteer Opportunities with St. Luke Sports

We are currently seeking volunteer parents to help us with the following supports: JV Volleyball, Varsity Volleyball, and Flag Football. If you are interested, please contact Coach Needleman at seth.needleman@stlukeparish.com or by calling 965-8190 ASAP.



Fall Festival Bracelet Winner: MELISSA CAPPAREL

MENSAJE SEMANAL DE LA SRA. LOPEZ

Fechas Importantes

30 de agosto - Reunión del HSA 6pm y del Festival de Otoño 7pm.

1 de septiembre - Fotos Escolares de Otoño (Uniformes escolares solamente)

2 de septiembre ~ 8:15 am Misa/ Salida al Mediodía

5 de septiembre - Día del Trabajo; No Hay Clases

9 de septiembre ~ 8:15 am Misa

10 de septiembre 9am-11am Reunión del Consejo Escolar en el STEM Lab; 9am-12pm Seminario Protegiendo a los Hijos de Dios

16 de septiembre ~ 8:15 am Misa

23 de septiembre ~ 8:15 am Misa; 12pm-3pm Dance-a-thon

Condiciones del Tiempo Severas

En caso de condiciones del tiempo severas, por favor recuerden que SLCS sigue las decisiones hechas por el Distrito Escolar del Condado de Palm Beach en caso de un cierre de la escuela.

www.stlukespartans.com

561.965.8190

Saludos Padres de St. Luke,

Muchas gracias por acompañarnos la semana pasada en nuestra Noche de Regreso a la Escuela. Fue buenísimo ver a tantos de ustedes en nuestro campus. Esperamos que hayan tenido la oportunidad de anotarse para ser voluntario este año en St. Luke.

Muchas gracias a todos los que ayudaron con las paradas del pasaporte que se ubicaron en el Parish Center.



Ahora que estamos de regreso completamente a la escuela, quería compartir algunos consejos para un año escolar productivo. Intenten practicar esto regularmente para garantizar un año escolar productivo. Establezca rutinas y practíquelas. Vaya a dormir y levántese a la misma hora cada día. Asegúrese que su hijo/a lea durante 20 minutos y establezca un área y hora donde pueda hacer las asignaciones con tranquilidad. Hable con frecuencia sobre las metas con su hijo/a y de cómo la escuela le va a ayudar a alcanzar esas metas. Esto va a establecer un propósito para asistir a la escuela y ayudara a desarrollar un sentido de propiedad sobre su educación. Practique su fe en familia y ore durante las comidas, antes de ir a dormir y asistiendo a la Misa juntos los domingos.

Manténgase conectado con nosotros y síganos en Facebook, Twitter e Instagram. Que pasen una excelente semana.

Bendiciones
Sra. López



Kona Ice



Kona Ice Food Truck estará aquí en la escuela cada primer viernes que salimos al mediodía. Todas las familias están bienvenidas a comprar un helado en esos días. Una porción de la ventas será contribuida a la escuela.



Sabia que...

...que la Iglesia St. Luke tiene una Misa familiar cada domingo a las 9am? Los estudiantes de nuestra escuela participan en la liturgia como monaguillos/as, lectores, ujieres y ayuda técnica. Se sirven donas después de la Misa en el Centro Familiar St. Luke.

...que las maestras de St. Luke enriquecen su fe viendo los videos de la serie *Going Deeper?*

Formularios Deportivos

Si su hijo/a va a participar en cualquier deporte, necesitamos todos los formularios adecuados antes de participar. Todos los atletas tienen como requisito someter el formulario físico deportivo y el de concusión. Anejado encontraran ambos formularios. Recuerde, el medico de su hijo/a debe llenar esos formularios. Nuestra política: No formularios – no práctica- no juegos.

www.stlukespartans.com
561.965.8190

Conferencia Virtus, Protegiendo a los Hijos de Dios

Como recordatorio, la clase de Protegiendo a los Hijos de Dios será el sábado 9 de septiembre (ingles) y sábado 24 de septiembre (español). Es muy importante que todos los padres que planifican participar como voluntarios en el colegio tomen esta clase. Si usted ya la tomo en el pasado no tiene que volver a tomarla. Es un entrenamiento de una sola vez. Para poder registrarse, favor de seguir estos pasos:



Vaya a www.diocesepb.org

1. A mano derecha, pulse en "Safe Environments"
2. A mano izquierda, pulse en "Virtus Training"
3. Una pantalla le saldrá con un listado de las próximas conferencias. Asegúrese presionar donde dice "St. Luke Saturday, September 10 (English) or September 24 (Spanish) 9am-12pm."
4. Los asistentes simplemente pulsan en START REGISTRATION" y de ahí termina la registraci3n. Por favor tome nota, los asistentes deben seguir las instrucciones de arriba y pre- registrarse para el entrenamiento.

Pista y campo para grados 6-8 con Coach Bacchus

Prácticas- Comienzan el 29 de agosto, cada lunes, martes y jueves de 3:30 pm a 4:15 pm

Competencias- miércoles: 7 de septiembre, 14 de septiembre, 21 de septiembre, 28 de septiembre, 5 de octubre, 12 de octubre y el campeonato el 19 de octubre.

*Todas las competencias son en Cardinal Newmann High School y comienzan a las 6pm.

Voleibol Junior con Coach Sargent

Nuestro primer juego es este miércoles a las 4pm en St. Ann Catholic School. Recuerde entregar todos los formularios el martes para poder recibir su uniforme.

Oportunidades de Voluntarios con los deportes de St. Luke

Actualmente estamos buscando padres voluntarios que nos ayuden con los siguientes deportes: Voleibol Junior, Voleibol Senior, and "Flag Football". Si usted esta interesado, comuníquese con Coach Needleman a seth.needleman@stlukeparish.com o llamando al 965-8190 lo antes posible.



Ganador del brazalete Festival de Otoño: MELISSA CAPPAREL

MADAM LOPEZ MESAJ CHAK SEMEN

Dat enpotan k'ap vini

30 Out 2016: HSA meeting a 6 pm, avèk rankont pou Festival Otòn a 7 pm

1 Septanm 2016: Jou foto (fò timoun you mete unifòm lekòl yo)

2 Septanm 2016: Gen mès nan legliz la a 8:15 am, epi y'ap lage a midi.

5 Septanm 2016: Fèt jou travay, pa gen lekòl jou a.

9 Septanm 2016: Gen mès nan legliz la a 8:15 am.

10 Septanm 2016: 9am-11am Rankont "School Advisory Council" l'ap fèt nan STEM Lab; 9am-12pm antrènman pou "Protege pitit Bondye"

16 Septanm 2016: Gen mès nan legliz la a 8:15 am.

23 Septanm 2016: Gen mès nan legliz la a 8:15 am, epi a 12pm pou 3:00pm gen "Dance-a-thon"

Nan Ka Move Tan

Si gen move tan, sonje ke SLCS suiv desizyon School District Palm Beach County a, konsènan si lekòl la ap fèmen.

Chè paran St. Luke,

Mèsi anpil pou rankont nou te fè avèk ou semèn pase a, nan okazyon ouvèti lekòl la. Sa te bèl anpil pou nou te wè tout manman ak papa ki te la.

Mwen espere ke paran yo te gen chans siyen pou fè volonte pou ane lekòl la. Mèsi ak tout moun ki te bay patisipasyon yo pou diferan kalite aktivite ki tap fèt nan Parish Hall la.

Kounye ya nou antre danble nan ane lekòl la, kite mwen ba nou kèk konsèy pou ane a ka byen pase. Eseye sèvi ak konsey sa yo:

Mete tan pou nou prakite yo. Al domi e leve a menm lè chak jou. Asire'n ke timou nou li pou 20 minit chak jou e prepare yon plas ki trankil pou yo fè devwa yo.

Toujou pale ak timoun you sou rèv yo a kijan lekòl la ap ede yo realize rèv sa yo. Sa ap devlope lakay yo yon rezon pou yo ale lekòl e bay yo yon sans de responsabilite nan edikasyon yo. Pratike lafwa nou an fanmi, priye avan nou manje, avan n'al domi, al legliz ansanm lè dimanch.

Rete konekte ak nou sou Facebook, twitter, ak Instagram, Mwen swete tout moun you bon semèn.

BonDye beni n

Mme. Lopez.



Kona Ice



Kona ICE Kona Ice Food Truck ap kanpe nan lekòl la nan premye vendredi lè n'ap lage a midi yo. Fanmi St. Luke yo ankouraje achte kòn glas nan jou sa yo. Yon pati nan profi ke yo fè ap benefisye lekòl St. Luke la.



Eske ou te konnen...

...ke St. Luke gen mès pou fanmi yo chak dimanch a 9:00am? Elèv St. Luke yo patisipe nan liturgie a kòm enfant de coeur, lecteur, moun k'ap fè kèt, epi yo ede avèk teknoloji. Gen donuts nan Family Life Center a aprè mès la.

...ke pwofesè St. Luke yo anrichi la fwa yo paske yo gade video seri "Going Deeper."

Fòm Sport

Si pitit ou ap patisipe nan okenn nan rizib, nou bezwen yon fòmilè anvan patisipasyon. Tout sportifs yo te mande pou soumèt yon fòmilè fizik espò yo ak fòm wo kou nan tèt. Atache lèt ki genyen nouvèl sa a pou w ap jwenn tou de fizik evalyasyon ak gwo chòk nan tèt fòmilè. Pa bliye, doktè ki pitit ou a ap bezwen pou konplete fòmilè fizik. Nou règleman, fòmilè-non pa pratike-non jwèt.

www.stlukepalmsprings.org
561.965.8190

Proteje Pitit Bondye/Virtus

Kòm rapèl, klas "Proteje Pitit Bondye" ap rankontre samdi 9 Septanm (anglè), ak samdi 24 Septanm (panyòl). Li enpòtan ke tout paran ki swete fè volontè nan lekòl la complete klas sa. Si ou te pran klas sa deja, ou pa oblije fè'l ankò. Antrènman sa, se yon fwa sèlman ou bezwen fè'l. Pou ou anregistre, suiv enstriksyon sa yo:

1. Ale sou (diocesepb.org)
2. Cliche sou "Safe environments" ki ap sou bò dwat ou
3. Cliche sou "Virtus training" sou bò gauche ou
4. Tout Pwochen workshops yo ap parèt, cliche sou St. Luke Saturday September 10 (English) oswa September 24 (Spanish) 9am-12pm.
5. Volontè a ap sèlman cliche sou "Start Registration" pou li kòmanse enskri.



N.B. tout volontè yo dwe suiv enstriksyon sa yo pou yo enskri avan ke yo ka pran klas lan.

Cross-Country pou timoun 6-8 ane avèk Coach Bacchus

Antrènman kòmanse 29 Out, chak lundì, mardì, ak jeudi, de 3:30pm a 4:15pm.

Konpetisyon--Mercredi; 7 Septanm, 14 Septanm, 28 Septanm, 5 Oktòb, 12 Oktòb, ak final la 19 Oktòb.

*Tout rankont konpetisyon yo ap fèt nan Cardinal Newman, a pati de 6:00pm.

JV Volleyball avèk Coach Sargent

Premye match nou ap fèt Jeudi sa a 4:00pm nan St. Ann Catholic School. Svp pa bliye ke nou dwe remèt tout fòm yo pou nou jwenn unifòm nou.

Opòtinite pou nou fè volontè avèk ekip sport St. Luke

Nou ap chèche paran volontè ki pou ede nou avèk: JV Volleyball, Varsity Volleyball, ak Flag Football. Si ou interese ou ka pran kontakt avèk Coach Needleman, email li se seth.needleman@stlukeparish.com ou byen ou ka rele 965-8190 le plus vite que possible.



Tonbe festival brasle idantite gayan: MELISSA CAPPAREL

KONA ICE®



HEY, KONA ICE IS COMING...

September 2nd, After School!

Regular: \$3.00

King Kona (Comes w/ Flower lei): \$4.00

Kowabunga (\$3.00 refill cup): \$5.00

Portion of our proceeds donated to St. Luke's!



www.kona-ice.com

Great For Special Events, Parties, & Fundraisers!

ST. LUKE CATHOLIC SCHOOL LIBRARY

25th August 2016

Dear Parents,

I am very excited to be here at St. Luke's. I look forward to a wonderful year in the library with your children.

Here are some of the things that students will be learning:

- Organization of the library (alphabetical order for fiction; Dewey Decimal order for non-fiction)
- Research skills (using both print and online sources)
- Readers' Theatre/Storytelling

Hopefully they will also all learn (if they don't already) to love books, stories, and reading.

Children are allowed to check out one book per week. (Depending on school projects, older children may be permitted to check out extra books.) They must return the book the following week. They can ask to renew it.

Library Schedule

Thursday: Kindergarten, 1st grade, 3rd grade, 5th grade, 6th grade

Friday: Preschool, 2nd grade, 4th grade, 7th/8th grade

I am happy to hear that so many students already have library cards for the Palm Beach County Public Library. If you don't have one, I encourage you to get yourself and your children library cards. There are so many wonderful free programs and resources that you and your children can use both at the library and online at home.

Please contact me if you have any questions.

Sincerely,

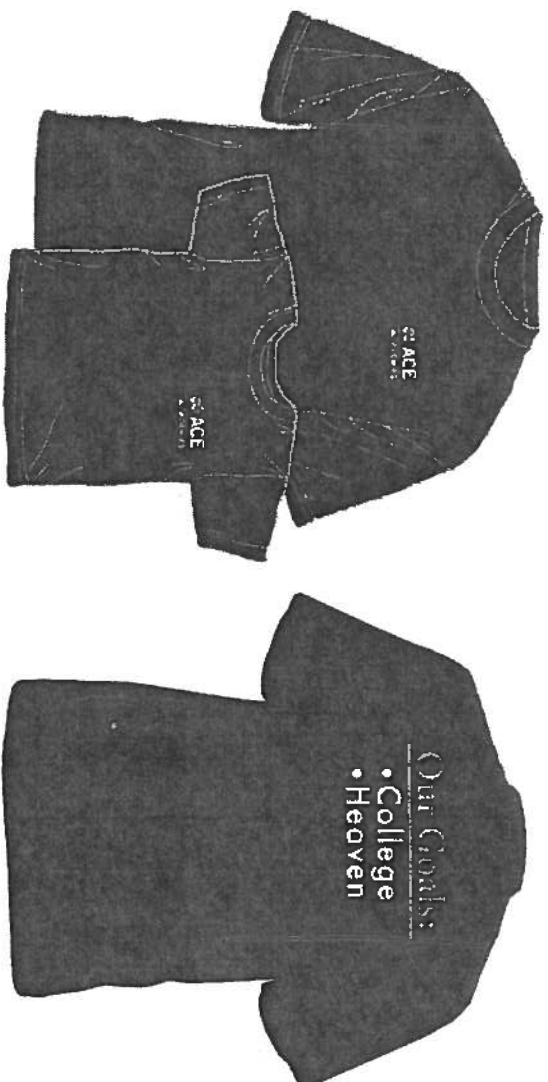
Gabrielle M. Reilly
Librarian/Media Specialist
gabrielle.reilly@stlukeparish.com

LEER

READ

LIRE

ST. LUKE SPIRIT SHIRTS ORDER FORM



Student Name: _____ Grade: _____

Shirt Size (indicate quantity):

Youth: ___ Small ___ Medium ___ Large

Adult: ___ Small ___ Medium ___ Large ___ XL ___ XXL

\$10.00 per shirt

Cash or Checks (payable to St. Luke Catholic School)

*Shirts are expected to arrive in early September. All pre-ordered shirts will be delivered to your child's homeroom.



Preparticipation Physical Evaluation (Page 1 of 3)

This completed form must be kept on file by the school. This form is valid for 365 calendar days from the date of the evaluation as written on page 2. This form is non-transferable; a change of schools during the validity period of this form will require page 1 of this form to be re-submitted.

Part 1. Student Information (to be completed by student or parent)

Student's Name: _____ Sex: _____ Age: _____ Date of Birth: _____
 School: _____ Grade in School: _____ Sport(s): _____
 Home Address: _____ Home Phone: (____) _____
 Name of Parent/Guardian: _____ E-mail: _____
 Person to Contact in Case of Emergency: _____
 Relationship to Student: _____ Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____
 Personal Family Physician: _____ City/State: _____ Office Phone: (____) _____

Part 2. Medical History (to be completed by student or parent). Explain "yes" answers below. Circle questions you don't know answers to.

	Yes	No		Yes	No
1. Have you had a medical illness or injury since your last check up or sports physical?	___	___	26. Have you ever become ill from exercising in the heat?	___	___
2. Do you have an ongoing chronic illness?	___	___	27. Do you cough, wheeze or have trouble breathing during or after activity?	___	___
3. Have you ever been hospitalized overnight?	___	___	28. Do you have asthma?	___	___
4. Have you ever had surgery?	___	___	29. Do you have seasonal allergies that require medical treatment?	___	___
5. Are you currently taking any prescription or non-prescription (over-the-counter) medications or pills or using an inhaler?	___	___	30. Do you use any special protective or corrective equipment or medical devices that aren't usually used for your sport or position (for example, knee brace, special neck roll, foot orthotics, sham, retainer on your teeth or hearing aid)?	___	___
6. Have you ever taken any supplements or vitamins to help you gain or lose weight or improve your performance?	___	___	31. Have you had any problems with your eyes or vision?	___	___
7. Do you have any allergies (for example, pollen, latex, medicine, food or stinging insects)?	___	___	32. Do you wear glasses, contacts or protective eyewear?	___	___
8. Have you ever had a rash or hives develop during or after exercise?	___	___	33. Have you ever had a sprain, strain or swelling after injury?	___	___
9. Have you ever passed out during or after exercise?	___	___	34. Have you broken or fractured any bones or dislocated any joints?	___	___
10. Have you ever been dizzy during or after exercise?	___	___	35. Have you had any other problems with pain or swelling in muscles, tendons, bones or joints?	___	___
11. Have you ever had chest pain during or after exercise?	___	___	<i>If yes, check appropriate blank and explain below:</i>		
12. Do you get tired more quickly than your friends do during exercise?	___	___	___ Head	___ Elbow	___ Hip
13. Have you ever had racing of your heart or skipped heartbeats?	___	___	___ Neck	___ Forearm	___ Thigh
14. Have you had high blood pressure or high cholesterol?	___	___	___ Back	___ Wrist	___ Knee
15. Have you ever been told you have a heart murmur?	___	___	___ Chest	___ Hand	___ Shin/Calf
16. Has any family member or relative died of heart problems or sudden death before age 50?	___	___	___ Shoulder	___ Finger	___ Ankle
17. Have you had a severe viral infection (for example, myocarditis or mononucleosis) within the last month?	___	___	___ Upper Arm	___ Foot	
18. Has a physician ever denied or restricted your participation in sports for any heart problems?	___	___	36. Do you want to weigh more or less than you do now?	___	___
19. Do you have any current skin problems (for example, itching, rashes, acne, warts, fungus, blisters or pressure sores)?	___	___	37. Do you lose weight regularly to meet weight requirements for your sport?	___	___
20. Have you ever had a head injury or concussion?	___	___	38. Do you feel stressed out?	___	___
21. Have you ever been knocked out, become unconscious or lost your memory?	___	___	39. Have you ever been diagnosed with sickle cell anemia?	___	___
22. Have you ever had a seizure?	___	___	40. Have you ever been diagnosed with having the sickle cell trait?	___	___
23. Do you have frequent or severe headaches?	___	___	41. Record the dates of your most recent immunizations (shots) for:		
24. Have you ever had numbness or tingling in your arms, hands, legs or feet?	___	___	Tetanus: _____ Measles: _____		
25. Have you ever had a stinger, burner or pinched nerve?	___	___	Hepatitis B: _____ Chickenpox: _____		
FEMALES ONLY (optional)					
42. When was your first menstrual period? _____					
43. When was your most recent menstrual period? _____					
44. How much time do you usually have from the start of one period to the start of another? _____					
45. How many periods have you had in the last year? _____					
46. What was the longest time between periods in the last year? _____					

Explain "Yes" answers here: _____

We hereby state, to the best of our knowledge, that our answers to the above questions are complete and correct. In addition to the routine medical evaluation required by s.1006.20, Florida Statutes, and FHSAA Bylaw 9.7, we understand and acknowledge that we are hereby advised that the student should undergo a cardiovascular assessment, which may include such diagnostic tests as electrocardiogram (EKG), echocardiogram (ECG) and/or cardio stress test.

Signature of Student: _____ Date: _____ Signature of Parent/Guardian: _____ Date: _____



Florida High School Athletic Association
Preparticipation Physical Evaluation (Page 2 of 3)

This completed form must be kept on file by the school. This form is valid for 365 calendar days from the date of the evaluation as written on page 2. This form is non-transferable; a change of schools during the validity period of this form will require page 1 of this form to be re-submitted.

Part 3. Physical Examination (to be completed by licensed physician, licensed osteopathic physician, licensed chiropractic physician, licensed physician assistant or certified advanced registered nurse practitioner).

Student's Name: _____ Date of Birth: _____

Height: _____ Weight: _____ % Body Fat (optional): _____ Pulse: _____ Blood Pressure: _____ / _____ (_____ / _____)

Temperature: _____ Hearing: right: P _____ F _____ left: P _____ F _____

Visual Acuity: Right 20/ _____ Left 20/ _____ Corrected: Yes No Pupils: Equal Unequal

FINDINGS	NORMAL	ABNORMAL FINDINGS	INITIALS*
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MEDICAL

- 1. Appearance _____
- 2. Eyes/Ears/Nose/Throat _____
- 3. Lymph Nodes _____
- 4. Heart _____
- 5. Pulses _____
- 6. Lungs _____
- 7. Abdomen _____
- 8. Genitalia (males only) _____
- 9. Skin _____

MUSCULOSKELETAL

- 10. Neck _____
- 11. Back _____
- 12. Shoulder/Arm _____
- 13. Elbow/Forearm _____
- 14. Wrist/Hand _____
- 15. Hip/Thigh _____
- 16. Knee _____
- 17. Leg/Ankle _____
- 18. Foot _____

* - station-based examination only

ASSESSMENT OF EXAMINING PHYSICIAN/PHYSICIAN ASSISTANT/NURSE PRACTITIONER

I hereby certify that each examination listed above was performed by myself or an individual under my direct supervision with the following conclusion(s):

Cleared without limitation
 Disability: _____ Diagnosis: _____
 Precautions: _____
 Not cleared for: _____ Reason: _____
 Cleared after completing evaluation/rehabilitation for: _____
 Referred to _____ For: _____

Recommendations: _____

Name of Physician/Physician Assistant/Nurse Practitioner (print): _____ Date: _____
Address: _____

Signature of Physician/Physician Assistant/Nurse Practitioner: _____



Florida High School Athletic Association

Preparticipation Physical Evaluation (Page 3 of 3)

This completed form must be kept on file by the school. This form is valid for 365 calendar days from the date of the evaluation as written on page 2. This form is non-transferable; a change of schools during the validity period of this form will require page 1 of this form to be re-submitted.

ASSESSMENT OF PHYSICIAN TO WHOM REFERRED (if applicable)

I hereby certify that the examination(s) for which referred was/were performed by myself or an individual under my direct supervision with the following conclusions:

___ Cleared without limitation

___ Disability: _____ Diagnostics: _____

___ Precautions: _____

___ Not cleared for: _____ Reason: _____

___ Cleared after completing evaluation/rehabilitation for: _____

Recommendations: _____

Name of Physician (print): _____ Date: _____

Address: _____

Signature of Physician: _____

Based on recommendations developed by the American Academy of Family Physicians, American Academy of Pediatrics, American Medical Society for Sports Medicine, American Chiropractic Society for Sports Medicine and American Osteopathic Academy for Sports Medicine



**DIOCESE OF PALM BEACH
SPORTS CONSENT AND RELEASE FROM LIABILITY**

Student: _____ School: _____

Sports in which the student plans to participate: _____

- _____
- A. I/we hereby give consent for our child/ward to participate in the interscholastic sports listed above.
- B. I/we am aware of the potential danger of concussions and/or head and neck injuries in athletic participation. I also have knowledge about the risks associated with heat related illness during athletic participation and have received information as to the risk of continuing to practice or play once a concussion or head injury is sustained without proper medical clearance.
- C. I/we know of and acknowledge that my child/ward knows of the risks involved in athletic participation, understands that serious injury, and even death, is possible in such participation and choose to accept any and all responsibility for his/her safety and welfare while participating in athletics. With full understanding of the risks involved, I/we release and hold harmless my child's/ward's school, the school against which it competes, the contest officials and coaches, and the Diocese of Palm Beach including all of its affiliated entities and agents of any and all legal responsibility and liability for any injury or claim resulting from such athletic participation and agree to take no legal action against my child's/ward's school, the schools against which it competes, the contest officials and coaches and the Diocese of Palm Beach because of any claim, costs, or cause of action arising in any way from the athletic participation of my child/ward. I further authorize emergency medical treatment for my child/ward should the need arise for such treatment while my child/ward is under the supervision of the school.

I/we have read this document carefully. I/we understand the contents of the document and I/we are aware that it contains a release of liability. I/we understand that the student may not practice or compete in any sports activity until this document is on file with the principal.

Parent/Guardian

Parent/Guardian

Date

Note: This document must be completed and endorsed by the student's parent or guardian and kept on file at the school. When received, the document should be date stamped and initialed by the athletic director or the principal.



Diocese of Palm Beach

Pre-Participation Head Injury/Concussion Reporting Form for Extracurricular Activities

This form should be completed by the student's parent(s) or legal guardian(s). It must be submitted to the Athletic Director, or official designated by the school, prior to the start of each season a student plans to participate in an extracurricular activity.

Student Information

Name: _____

Grade: _____

Sport(s): _____

Home Address: _____

Has student ever experienced a traumatic head injury (a blow to the head)? Yes ___ No ___
If yes, when? Dates (month/year): _____

Has student ever received medical attention for a head injury? Yes ___ No ___
If yes, when? Dates (month/year): _____
If yes, please describe the circumstances: _____

Was student diagnosed with a concussion? Yes ___ No ___
If yes, when? Dates (month/year): _____
Duration of Symptoms (such as headache, difficulty concentrating, fatigue) for most recent concussion: _____

Parent/Guardian Name: _____
(Please Print)

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Name: _____
(Please Print)

Parent/Guardian Signature: _____ Date: _____

Student Athlete Signature: _____ Date: _____



For official use only:
Name of Athlete: _____
Sport/Season: _____
Date Received: _____

Concussion Awareness Parent/Student-Athlete Acknowledgement Statement

I _____ and _____ the parent(s)/guardian(s) of
Parent/Guardian Parent/Guardian

_____, acknowledge that I have received information on all of the following:
Name of Student/Athlete _____

- The definition of a concussion
- The signs and symptoms of a concussion to observe for or that may be reported by my athlete
- How to help my athlete prevent a concussion
- What to do if I think my athlete has a concussion, specifically, to seek medical attention right away, keep athlete out of play, tell the coach about a recent concussion, and report any concussion and/or symptom to the school nurse.

Parent/Guardian _____
PRINT NAME

Parent/Guardian _____ Date: _____
SIGNATURE

Parent/Guardian _____
PRINT NAME

Parent/Guardian _____ Date: _____
SIGNATURE

Student Athlete _____
PRINT NAME

Student Athlete _____ Date: _____
SIGNATURE

It's better to miss one game than the whole season.

HEADS*UP

CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR **ATHLETES**

What is a concussion?

- A concussion is a brain injury that:
 - is caused by a bump, blow, or jolt to the head or body,
 - can change the way your brain normally works,
 - can occur during practices or games in any sport or recreational activity,
 - can happen even if you haven't been knocked out,
 - can be serious even if you've just been "dinged" or "had your bell rung."

All concussions are serious. A concussion can affect your ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most people with a concussion get better, but it is important to give your brain time to heal.

What are the symptoms of a concussion?

You can't see a concussion, but you might notice **one or more** of the symptoms listed below or that you "don't feel right" soon after, a few days after, or even weeks after the injury.

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Blurred or double vision
- Bothered by light or noise
- Feeling sluggish, slow, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion

What should I do if I think I have a concussion?

- **Tell your coaches and your parents.** Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach right away if you think you have a concussion or if one of your teammates might have a concussion.
- **Get a medical check-up.** A doctor or other health care professional can tell if you have a concussion and when it is OK to return to play.
- **Give yourself time to get better.** If you have a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have another concussion. Repeat concussions can increase the time it takes for you to recover and may cause more damage to your brain. It is important to rest and not return to play until you get the OK from your health care professional that you are symptom-free.

How can I prevent a concussion?

Every sport is different, but there are steps you can take to protect yourself.

- Use the proper sports equipment, including personal protective equipment. In order for equipment to protect you, it must be:
 - the right equipment for the game, position, or activity
 - Worn correctly and the correct size and fit
 - Checked every time you play or practice
- Follow your coach's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.

If you think you have a concussion:
Don't hide it. Report it. Take time to recover.

It's better to miss one game than the whole season.

For more information and to order additional materials *free-of-charge*, visit www.cdc.gov/Concussion.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION

