



MHSAA SPORTS HEALTH QUESTIONNAIRE - CONSENT - INSURANCE

Shaded headline areas are to be completed by student, parent/guardian or 18-year old

There are **FOUR (4)** signatures on this page **4** to be completed by student, parent/guardian and/or 18-year-old

Student Name: _____ last _____ first _____ middle initial _____

Student Address: _____ street _____ city _____ zip _____

Gender: ___ M ___ F Age: ___ Date of Birth: _____ Place of Birth (City/State): _____

School: _____ Grade: _____

Father/Guardian Name: _____

Phone (home): _____ (work): _____ (cell): _____

Mother/Guardian Name: _____

Phone (home): _____ (work): _____ (cell): _____

Email Address: Parent/Guardian/18-Year-Old: _____

STUDENT PARTICIPATION & PARENT or GUARDIAN or 18-YEAR-OLD CONSENT

The information submitted herein is truthful to the best of my knowledge. By my/my child's signature below, I/we acknowledge that I/we have received concussion educational information that meets Michigan Department of Health and Human Services and MHSAA requirements.

Further, in consideration of my/my child's participation in MHSAA-sponsored athletics, I/we do hereby agree, understand, appreciate, and acknowledge: that participation in such athletics is purely voluntary; that such activities involve physical exertion and contact and that there is inherent risk of personal injury associated with participation in such activities, which risk I/we assume; and that I/we agree to, and hereby waive any and all claims, suits, losses, actions, or causes of action against the MHSAA, its members, officers, representatives, committee members, employees, agents, attorneys, insurers, volunteers, and affiliates based on any injury to me, my child, or any person, whether because of inherent risk, accident, negligence, or otherwise, during or arising in any way from my/my child's participation in an MHSAA-sponsored sport.

I/we understand that I am/we are expected to adhere firmly to all established athletic policies of my school district and the MHSAA. I/we hereby give my consent for the above student to engage in interscholastic athletics and for the disclosure to the MHSAA of information otherwise protected by FERPA and HIPAA for the purpose of determining eligibility for interscholastic athletics. My child has my permission to accompany the team as a member on its out-of-town trips.

1 Signature of **STUDENT**: _____ Date: _____

2 Signature of **PARENT or GUARDIAN or 18-YEAR-OLD**: _____ Date: _____

INSURANCE STATEMENT

Our son/daughter will comply with the specific insurance regulations of the school district.

The student-athlete has health insurance: ___ YES ___ NO

If YES, Family Insurance Co: _____ Insurance ID #: _____

Additionally, I hereby state that, to the best of my knowledge, my answers to the medical health questions (see reverse) are complete and correct.

3 Signature of **PARENT or GUARDIAN or 18-YEAR-OLD**: _____ Date: _____

----- (DETACH HERE IF NEEDED TO ACCOMPANY STUDENT-ATHLETE) -----

MEDICAL TREATMENT CONSENT: COMPLETED BY PARENT or GUARDIAN or 18-YEAR OLD

I, _____, an 18-year-old, or the parent or guardian of _____, recognize that as a result of athletic participation, medical treatment on an emergency basis may be necessary, and further recognize that school personnel may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under the then-existing circumstances and to assume the expenses of such care.

4 Signature of **PARENT or GUARDIAN or 18-YEAR-OLD**: _____ Date: _____

2020-21 MHSAA SPORTS HEALTH QUESTIONNAIRE

Frequently Asked Questions

1. Are electronic signatures acceptable on the Health Questionnaire?

Yes. See MHSAA Handbook Interpretations 16 and 17.

2. Can a school still require selected students or all students to receive a complete physical exam?

Yes.

3. Can a parent still require their child to receive a complete physical exam?

Yes.

4. Does a valid physical exam from 2019-20 apply to students in any grade (5-11) and then the Health Questionnaire will meet the requirement for participation in 2020-21.

Yes. If a student received a valid sports physical exam during the 2019-20 school year (one completed on or after April 15, 2019), they may complete the Health Questionnaire for 2020-21.

5. Does the new 2020-21 Health Questionnaire apply to the fall, winter and spring seasons?

Yes. If a student received a valid sports physical exam during the 2019-20 school year (one completed on or after April 15, 2019), they may complete the Health Questionnaire for 2020-21 for all seasons.

6. Do schools still need to have the Health Questionnaire on file in the school prior to practicing, as is the case with the physical?

Yes.

7. What if the school cannot confirm that a valid sports physical exam exists from the 2019-20 school year (one completed on or after April 15, 2019)?

If the school cannot confirm that a valid sports physical exam exists from the 2019-20 school year, the student needs to have a new sports physical exam for 2020-21.

8. Does a new student (incoming 9th grade or transfer student) need to produce their 2019-20 valid physical exam (along with their 2020-21 Health Questionnaire) to the new school athletic director prior to practicing?

Yes.

9. Will a valid 2019-20 physical exam from another state, province or another school district be permitted along with a completed Health Questionnaire?

Yes.

10. In 2020-21, what occurs if the school discovers a student participated in a contest without a valid physical from 2019-20 and/or a completed 2020-21 Health Questionnaire?

Once discovered, the student is ineligible from further competition until the documents are submitted to the school. In 2020-21 only, forfeiture of contests will not be required. However, the student may not participate any further without the completion of either document.

11. What if a parent or student refuses to sign and complete the Health Questionnaire?

If a student or parent refuses to sign and complete the Health Questionnaire, the student may not participate in athletic practices or competitions until the Health Questionnaire or a valid sports physical exam is submitted.

12. Where can I find more information about MHSAA Examinations?

See the MHSAA Handbook Regulation I, Section 3, Interpretations 16-20.