



BLACKSBURG HIGH SCHOOL BRUINS

3401 BRUIN LANE
BLACKSBURG, VA 24060
Phone: 540-951-5706
Fax: 540-951-5714
www.mcps.org/bhs

Signature Form for Insurance and Concussion

I understand that I am responsible for any medical expenses associated with participating in this athletic program. I am aware of the Student Accident insurance plan available through the school.

I have read the "Heads Up Concussion in HS Sports" Parent Fact Sheet and the "MCPS Response to Concussion" Form (both available to view on the BHS website under Athletics)

Parent/Guardian Signature

Date

Name of Student Athlete

Grade Level