



**YORK UNIVERSITY
INTRAMURAL SPORTS**
Department of Athletics & Recreation

Receipt of Review of Concussion Awareness Resource

Participant's Name: _____

Student Number: _____

Thank you for completing your review of the Concussion Awareness Resource.

- Under *Rowan's Law*, York University's Intramural Program within the Department of Athletics & Recreation will ask you to confirm that you reviewed one of the Concussion Awareness Resources in this website (Ontario.ca/concussions) before you can register/participate in a sport.
- You must review one of the resources once a year, and then confirm that you have completed the review every time you register with a sport organization. If you want to use this form to show that you have reviewed the concussion awareness resource, you can provide the completed form to your sport organization(s).
- Once you complete this form, you can save it (to your personal device/computer) or print this page to share with your sport organization and/or to serve as a reminder of when to review the Concussion Awareness Resources again next year.

Receipt of Review

I, _____ (print name) confirm that I have reviewed a Concussion Awareness Resource provided by the York University's Intramural Program within the Department of Athletics & Recreation.

Signature

Date

Form MUST be submitted to Tait McKenzie Client Services Desk or scanned and emailed to imsports.yorku.ca. Form must be submitted and recorded before participant will be permitted to participate in any activities administered by the York University Intramural Program.