WMU Camp Medical Insurance Form

This form must be completed **AND** all copies returned prior to camp participation

Camper's Name _____ **DOB**_____/_____/_____

Last First Middle

Address_____ **Home Phone (____)**_____

_____ **Sport**_____

Emergency Contact (Besides Parents)

Name_____ **Phone (____)**_____

Father/Guardian_____

Address_____

_____

City State Zip

DOB____/____/____**Cell Phone (____)**_____

Employer_____

Address_____

Work Phone (____)_____

Insurance Co._____

Address_____

Policy #_____

Group #_____

Phone # (____)_____

Mother/Guardian_____

Address_____

_____

City State Zip

DOB____/____/____**Cell Phone (____)**_____

Employer_____

Address_____

Work Phone (____)_____

Insurance Co._____

Address_____

Policy #_____

Group #_____

Phone # (____)_____

All bills must be submitted to family insurance first! An explanation of benefits must accompany unpaid balance upon submittal to WMU camp insurance carrier.

CAMP PARTICIPATION WILL BE PROHIBITED WITHOUT THIS FORM

PARENTAL CONSENT AND WAIVER OF RESPONSIBILITY

In Consideration of the Western Michigan University Summer Sports Camp, acceptance of _____ as a student in the Western Michigan University Summer Sports Camp, the undersigned student and parent or guardian agree that Western Michigan University and/or the Western Michigan Summer Sports Camp and/or their trustees, agents, or employees will not be held responsible for any accident, injury or loss, however caused and agree to release all parties from all claims or damages which may arise as a result of or by reason of such accident, injury, loss or medical expenses.

The Western Michigan University Summer Sports Camp reserves the right to terminate the stay of any student without refund and without formal hearing, when it is deemed to be in the best interest of either the student or the summer sports school as determined by the University and program staff and employees. The University and Sports Camp staff expressly reserves the exclusive right to establish and determine the standards of conduct, behavior, and performance of participants engaging in the program and to acquire compliance with such standards as a condition to continued participation in the program.

The undersigned hereby further consent to Western Michigan University's and Summer Sports Camp staff obtaining whatever medical treatment and/or care is deemed necessary by such staff for the health and well-being of the student participating during the term of his/her program participation, including the consent to obtain and have administered any emergency medical or surgical treatment recommended by any physician licensed to practice medicine in the state of Michigan.

I hereby authorize medical attention to be administered to my son/daughter, _____ who is participating in the WMU Summer Sport Camp.

Date_____/_____/_____ Parent's Signature_____

PARENT & ATHLETE CONCUSSION INFORMATION SHEET

HEADS UP CONCUSSION

WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head or body that causes the head and brain to move quickly back and forth. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?

Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury.

If an athlete reports one or more symptoms of concussion after a bump, blow, or jolt to the head or body, s/he should be kept out of play the day of the injury. The athlete should only return to play with permission from a health care professional experienced in evaluating for concussion.

DID YOU KNOW?

- Most concussions occur without loss of consciousness.
- Athletes who have, at any point in their lives, had a concussion have an increased risk for another concussion.
- Young children and teens are more likely to get a concussion and take longer to recover than adults.

SYMPTOMS REPORTED BY ATHLETE:

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not "feeling right" or is "feeling down"

SIGNS OBSERVED BY COACHING STAFF:

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall

Michigan Department of Community Health
MDCH
Rick Snyder, Governor
James K. Haveman, Director

"IT'S BETTER TO MISS ONE GAME THAN THE WHOLE SEASON"

CONCUSSION DANGER SIGNS

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. An athlete should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously)

WHAT SHOULD YOU DO IF YOU THINK YOUR ATHLETE HAS A CONCUSSION?

1. If you suspect that an athlete has a concussion, remove the athlete from play and seek medical attention. Do not try to judge the severity of the injury yourself. Keep the athlete out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says s/he is symptom-free and it's OK to return to play.
2. Rest is key to helping an athlete recover from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, and playing video games, may cause concussion symptoms to reappear or get worse. After a concussion, returning to sports and school is a gradual process that should be carefully managed and monitored by a health care professional.
3. Remember: Concussions affect people differently. While most athletes with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

WHY SHOULD AN ATHLETE REPORT THEIR SYMPTOMS?

If an athlete has a concussion, his/her brain needs time to heal. While an athlete's brain is still healing, s/he is much more likely to have another concussion. Repeat concussions can increase the time it takes to recover. In rare cases, repeat concussions in young athletes can result in brain swelling or permanent damage to their brain. They can even be fatal.

_____
STUDENT-ATHLETE NAME PRINTED

_____
STUDENT-ATHLETE NAME SIGNED

_____
DATE

_____
PARENT OR GUARDIAN NAME PRINTED

_____
PARENT OR GUARDIAN NAME SIGNED

_____
DATE

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HEADS UP

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