



TACKLE FOOTBALL PLAYERS WANTED

COMMUNITY FOOTBALL CLUB REGISTRATION

What: Full Pads / Full Contact Cozad Tackle Football

When: Monday August 13, 2018 at Community Wellness Center in Cozad at 5:30 p.m.
(**Players must be present** to try on equipment)

Who: All 5th & 6th Grade Students that are not 13 years old as of August 1, 2018.

Fee: \$65.00 due at registration.

What is Provided: Helmet, Shoulder pads, pants, jerseys, (1) mouthpiece, thigh, knee, hip and Tailbone pads. Team Camp Insurance is also provided.

PARENT or GUARDIAN signature is REQUIRED

PRACTICES: Tuesdays and Thursdays beginning Tuesday August 21, 2018 at 4:50
First practice will be helmets, shirts, shorts and cleats or running shoes.

GAMES: Sunday Afternoons beginning Sunday September 9th

PRACTICES WILL BE HELD AT MUNI PARK (South of Swimming Pool)

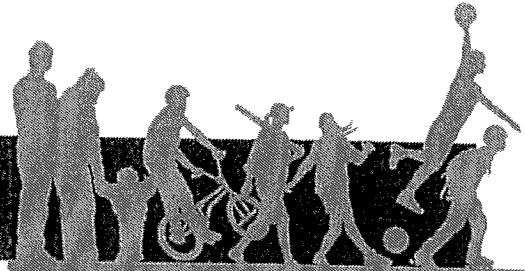
GAMES will also be held at Muni Park

Questions call Eric Ide or Adam Boryca at 308/784-2000 (daytime)



For schedules, pictures & updates, like us on Facebook (Community Football Club – Nebraska)

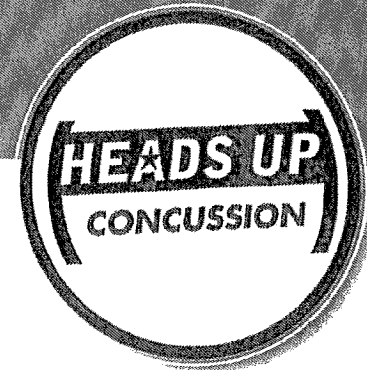
CONCUSSION FACT SHEET FOR PARENTS



WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

You can't see a 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 your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.



WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?

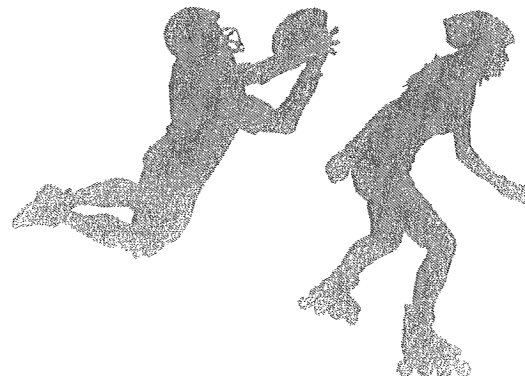
If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

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 PARENTS/ GUARDIANS:

- 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



DANGER SIGNS

Be alert for symptoms that worsen over time. Your child or teen should be seen in an emergency department right away if s/he has:

- One pupil (the black part in the middle of the eye) larger than the other
- Drowsiness or cannot be awakened
- A headache that gets worse and does not go away
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Difficulty recognizing people or places
- Increasing confusion, restlessness, or agitation
- Unusual behavior
- Loss of consciousness (even a brief loss of consciousness should be taken seriously)

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

1. SEEK MEDICAL ATTENTION RIGHT AWAY

A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to regular activities, including sports.

2. KEEP YOUR CHILD OUT OF PLAY.

Concussions take time to heal. Don't let your child return to play the day of the injury and until a health care professional says it's OK. Children who return to play too soon - while the brain is still healing - risk a greater chance of having a second concussion. Repeat or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

3. TELL YOUR CHILD'S COACH ABOUT ANY PREVIOUS CONCUSSION.

Coaches should know if your child had a previous concussion. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

HOW CAN YOU HELP YOUR CHILD PREVENT A CONCUSSION OR OTHER SERIOUS BRAIN INJURY?

- Ensure that they follow their coach's rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity. Protective equipment should fit properly and be well maintained.
- Wearing a helmet is a must to reduce the risk of a serious brain injury or skull fracture.
 - However, helmets are not designed to prevent concussions. There is no "concussion-proof" helmet. So, even with a helmet, it is important for kids and teens to avoid hits to the head.

HOW CAN I HELP MY CHILD RETURN TO SCHOOL SAFELY AFTER A CONCUSSION?

Children and teens who return to school after a concussion may need to:

- Take rest breaks as needed
- Spend fewer hours at school
- Be given more time to take tests or complete assignments
- Receive help with schoolwork
- Reduce time spent reading, writing, or on the computer

Talk with your child's teachers, school nurse, coach, speech-language pathologist, or counselor about your child's concussion and symptoms. As your child's symptoms decrease, the extra help or support can be removed gradually.

JOIN THE CONVERSATION  www.facebook.com/CDCHeadsUp

TO LEARN MORE GO TO  WWW.CDC.GOV/CONCUSSION

Community Football Club Registration Form for Participants

Cozad Gothenburg Lexington Elwood Overton SEM Broken Bow

PLAYER NAME: _____
Grade in School _____ Birth date _____ Age as of 8/1 _____ Weight _____

Father/Guardian		Mother/Guardian	
Name: _____	_____	Name: _____	_____
Physical Address: _____	_____	Physical Address _____	_____
City: _____	_____	City _____	_____
Home Phone: _____	_____	Home Phone _____	_____
Work Phone: _____	_____	Work Phone _____	_____
Email: _____	_____	Email: _____	_____

Physician _____ Phone _____
Medical Insurance _____

_____ Name of Company Group Number ID Number
History of diabetes or epilepsy? Yes No (please circle one)
Please List Any Drug Allergies (sulfa, penicillin, etc.) _____

All football players and their parents are expected to exhibit good sportsmanship and act as ambassadors of their community at all practices and games. Community Football Club reserves the right to banish any player and/or parent from participation in the football program for failure to exhibit good sportsmanship. In the event of banishment of a player from the football program, all registration fees will be forfeited and the player will be required to return the equipment to the Community-Football Club.

At the end of this season, equipment must be turned in. (Check in date will be posted at practice and/or the final game). **If the equipment is not returned to the Community Football Club at year end, by signing this document you are personally liable for the amount of the replacement cost of the equipment checked out. This amount owed to the Community Football Club will be due and payable immediately. If not paid immediately the Community Football Club has the right to pursue collection action against you.**

I hereby certify that I have the legal authority to enroll the below named child in the Community Football Club youth program run by the Community Football Club (herein referred to as CFC) and that I have legal custody of said child as either guardian or parent, or as otherwise explained herein. I hereby hold CFC harmless from any and all liability arising from or connected to my status with regard to the above-named child.

I agree that in case of illness, accident or injury, emergency medical care may be given if necessary. If the doctor named herein cannot be reached, it will be acceptable to call another doctor, and I hereby agree to pay all medical and hospitalization charges and hold CFC harmless from responsibility for the same.

I/We, the parents and/or guardian of the above named child for a position on a Community Football Club league team, give my/our approval to participate in any and all league activities. I/We assume all risks & hazards incidental to such participation & I/We do hereby waive, release, absolve, indemnify, & agree to hold harmless the Community Football Club, the league, the chartering organization, the organizers, sponsors, coaches, referees & any other participants for any claims arising out of an injury to my/our child, whether the result if negligence or from any other cause, except to the extent and in any amount covered by accident & liability insurance. I/We understand that the insurance carried by this league covers only non-insured participants and liability insurance. I/We will furnish a certified birth certificate of the above named candidate to local officials on request.

I hereby certify that the participant information listed above is true and correct and by signing, I am taking personal liability for the care and return of the equipment checked out to the participant. I also certify that I have received educational material from CDC "HEADS UP Concussion", provided by the Community Football Club, and that I have read and understand "What is a concussion"; "What are the signs and symptoms"; "What to do if you think a participant has a concussion". I also certify that I received a copy of the rules of the Community Football Club.

Parent or Guardian Signature Date

Amount Paid: \$ _____ Cash / Check # _____
Flag \$35; Tackle \$65 Circle if cash