

Wedgwood Water Polo Registration 2011

Please return this registration form and Water Polo fees of \$50.00 (members) or \$70.00 (non-members) to the pool office. Please make checks payable to Wedgwood Swim Pool.

This form must be signed and returned to the club's coach before the listed child can participate in SSWPL team activities.

Name: _____ Birth Date: _____

Email: _____ Phone: _____

Emergency Phone(s): _____

I hereby consent to participation by my child, _____, in the Seattle Summer Water Polo League. I understand that this activity involves elements of risk of bodily injury, including, but not limited to, activities occurring in a pool and the surrounding environment. We will assume all risks associated with and incidental to participating in the sport of water polo. My child has no special medical conditions, except those described below, and is fit to participate on a water polo team.

Special Medical Conditions: _____

In consideration of the right and privilege for my child to participate, we hereby release, waive, and agree to hold harmless the Seattle Summer Water Polo League; this club, its members, directors, employees, coaches and volunteers; the club hosting the event, its members, directors, employees, coaches and volunteers; all paid and volunteer referees for any and all liability, claims, legal actions, and demands of any nature whatsoever which may arise from or in connection with the water polo team or related activities.

I understand that events may take place away from our club pool. I understand that the coaches are not responsible for transportation to games or related activities.

I hereby authorize emergency medical/dental care and treatment for my child, as necessary.

Parent/Guardian

Date

WEDGWOOD SWIM CLUB – Water Polo Concussion Form

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Symptoms may include one or more of the following:

- | | |
|--|--|
| <ul style="list-style-type: none">• Headaches• “Pressure in head”• Nausea or vomiting• Neck pain• Balance problems or dizziness• Blurred, double, or fuzzy vision• Sensitivity to light or noise• Feeling sluggish or slowed down• Feeling foggy or groggy• Drowsiness• Change in sleep patterns | <ul style="list-style-type: none">• Amnesia• “Don’t feel right”• Fatigue or low energy• Sadness• Nervousness or anxiety• Irritability• More emotional• Confusion• Concentration or memory problems (forgetting game plays)• Repeating the same question/comment |
|--|--|

Signs observed by teammates, parents and coaches include:

- | |
|---|
| <ul style="list-style-type: none">• Appears dazed• Vacant facial expression• Confused about assignment• Forgets plays• Is unsure of game, score, or opponent• Moves clumsily or displays incoordination• Answers questions slowly• Slurred speech• Shows behavior or personality changes• Can’t recall events prior to hit• Can’t recall events after hit• Seizures or convulsions• Any change in typical behavior or personality• Loses consciousness |
|---|

What can happen if my child keeps on playing with a concussion or returns too soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often fail to report symptoms of injuries. Concussions are no different. As a result, education of administrators, coaches, parents and students is the key to student-athlete's safety.

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new "Zackery Lystedt Law" in Washington now requires the consistent and uniform implementation of long and well-established return-to-play concussion guidelines that have been recommended for several years:

“a youth athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time”

and

“...may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider”.

You should also inform your child's coach if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:

<http://www.cdc.gov/ConcussionInYouthSports/>

Student-athlete Name Printed

Student-athlete Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date

Please only complete this page if you are a Sand Point member.

Summer 2011

To: Seattle Summer Water Polo League Board

Re: Application to Participate on Wedgwood's Water Polo Team for 2010 Season

I am a member of Sand Point Country Club and am interested in playing water polo this summer. I have _____ years of experience playing water polo and hope to gain more experience playing the game. As Sand Point CC does not have a water polo team, I am applying to participate on Wedgwood's water polo team for the 2011 season, including playoff and championship games.

Thank you for considering my request.

Name: _____

Phone: _____