

KENNEWICK SCHOOL DISTRICT

Sports – Concussion and Head Injuries

Compliance Statement for HB 1824, Youth Sports – Head Injury Policies
(attach to any building/facility use request form)

Access to Kennewick School District facilities **may not** be granted until all requirements of this application are complete and approved by the school district designee.

_____ requests the use of the Kennewick School District facilities for the following dates: _____

_____, a private non-profit youth sports group, verifies all *coaches*, athletes, and their parents/guardians have complied with mandated policies for the management of concussions and head injuries as prescribed by HB 1824, section 2.

Attached is a Proof of Insurance under an accident and liability policy issued by an insurance company authorized to do business in Washington State covering any injury or damage with at least limits of \$1,000,000 per occurrence and \$2,000,000 annual aggregate.

Signed: _____
(Representative of Private Non-Profit Youth Sports Group)

(Printed Name)

Date: _____