



## HEO Rowan's Law Acknowledgement Form

The Ontario Government has enacted *Rowan's Law (Concussion Safety), 2018*, S.O. 2018, c. 1 ("Act"). Ontario Regulation 161/19, the *Act* requires all sport organizations as defined in the Regulation ("Sports Organization"), which includes Hockey Eastern Ontario ("HEO"), to have a Concussion Code of Conduct. This Concussion Code of Conduct must require participants, as set out in the Act, to review the Ontario Government's issued Concussion Awareness Resources on an annual basis. A participant is subject to a Concussion Code of Conduct for each Sports Organization a participant registers with.

The HEO Code of Conduct is located at <http://www.hockeyeasternontario.ca/pages/admin/policies.htm> and the applicable age appropriate Concussion Awareness Resources are located at [www.ontario.ca/concussions](http://www.ontario.ca/concussions). The HEO Concussion Code of Conduct and the appropriate Concussion Awareness Resources must be reviewed before you can register/participate in HEO.

- 10 and Under Concussion Awareness Resource
- 11-14 Concussion Awareness Resource
- 15 and Over Concussion Awareness Resource

If you would like to have a record of your review of the concussion awareness resources, you can complete this form and keep it as a receipt to remind you of the date on which you reviewed it.

### Acknowledgement of Review

I, \_\_\_\_\_ (first name) \_\_\_\_\_ (last name) \_\_\_\_\_ (birth date yyyy/mm/dd of athlete, Team Official or On-Ice Officials name) confirm that I have reviewed the HEO Concussion Code of Conduct (Appendix A) and the appropriate Concussion Awareness Resources and commit to operating within the parameters of the HEO Concussion Code of Conduct under the role which I have registered with the HEO.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

***If the participant above is under the age of the 18, then the parent of that participant must also sign the Acknowledgement set out below.***

I, \_\_\_\_\_ (print name of parent if above signatory is under 18) confirm that I have reviewed the HEO Concussion Code of Conduct and the appropriate Concussion Awareness Resources and commit that the signatory above and I will operate within the parameters of the HEO Concussion Code of Conduct under the role which I have registered with the HEO.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

***Disclaimer: In order to register/participate within HEO this signed form must be submitted to the Minor Hockey Association that you are registering with.***

## APPENDIX A

### **I will help prevent concussions by my commitment to:**

- Wearing the proper equipment for my sport and wearing it correctly;
- Respecting the rules of my sport or activity; and
- My commitment to fair play and respect for all\* (respecting other athletes, coaches, team trainers and officials).

### **I will care for my and others health and safety by taking concussions seriously, and I understand that:**

- A concussion is a brain injury that can have both short- and long-term effects;
- A blow to the head, face or neck, or a blow to the body that causes the brain to move around inside the skull may cause a concussion; and
- A person doesn't need to lose consciousness to have had a concussion.

### **I will commit to:**

- report any possible concussion received during participation in HEO to a designated person;
- recognizing a concussion or possible concussion and the reporting to a designated person when an individual suspect that another individual may have sustained a concussion;
- sharing any pertinent information regarding incidents of a removal from sport with the Player's school and other sport organization with which the player has registered;
- sharing any pertinent information regarding incidents of a concussion that have occurred outside of participation in HEO to a designated person with your/individual's Team;
- Complete Injury Report Forms in a timely manner and ensure they are submitted to the Member;
- Give commitment to providing opportunities before and after each training, practice and competition to enable participants to discuss potential issues related to concussions; and
- Maintain an open dialogue with all athletes and participants (and parents/guardians in cases of minors) about their health and any signs and symptoms of concussion they may experience.

### **I will commit to respect the HEO Removal and Return to Play Protocol by:**

- Understanding that if I have a suspected concussion, I will be removed from sport and that I will not be able to return to training, practice or competition until I undergo a medical assessment by a medical doctor or nurse practitioner and have been medically cleared to return to training, practice or competition;
- Understanding I will have to be medically cleared by a medical doctor or nurse practitioner before returning to training, practice or competition;
- Respect the roles and responsibilities of all coaches and health care professionals in Return to Play protocol; and
- Respond appropriately with Return to Play protocols if a participant is experiencing concussion related symptoms or if you suspect any participant has sustained a concussion.