



Community School of Naples

13275 Livingston Road • Naples, FL 34109 • Athletic Office 239-597-7575

ImPACT (Immediate Post-concussion Assessment and Cognitive Testing) Program

I give my consent to the Community School of Naples for ImPACT baseline and post injury cognitive testing of my child and release of information. All test data will be kept confidential in compliance with HIPPA requirements.

If a head injury is suspected, my child may undergo post-concussion ImPACT testing. I understand that my child may need to be tested more than once, depending upon the results of the test. My child's baseline test data will be kept on file on the secure ImPACT website. The results of these tests may be a factor in determining when/if my child will be permitted to resume active participation.

The Community School of Naples has permission to release ImPACT test result to the Team Physician and my child's primary care physician or other treating physician, as listed below.

Print Name of Child: _____

Print Name of Parent: _____

Signature of Parent: _____ Date: _____

Parent Preferred Contact Number: _____

Please print name of doctor(s) that data may be released to:

Name of Doctor: _____

Phone Number: _____