

## **RE-CERTIFICATION PROCESS: CIPPE FORMS**

*This Re-Certification form should be completed by a parent/guardian if their son/daughter has already had a physical and wants to participate in athletics in subsequent sports. (i.e.; Fall participant and wants to participate in winter or spring sports) The physical must be on file with East Allegheny and must be current.*

*In an attempt to stay current with health information on our student/athletes, we are asking that you update the CIPPE Health information. Please complete Section 7 “Re-Certification by Parent/Guardian” and be sure to sign and date, as well as, have your son/daughter sign and date this form to certify any changes that may have occurred.*

*This form must be completed and dated no earlier than six weeks prior to the first practice day of the sport that they plan on participating in. (After the second week of October for Winter Sports; after the third week of January for Spring Sports.)*

*If your son/daughter has had a change in their health status (injury that required medical attention) then Section 8 “Certification by Licensed Physician of Medicine or Osteopathic Medicine” must be completed by a licensed physician and turned in to their coach or trainer before they can participate.*

*Please turn this information in to your coach, Athletic trainer, or Athletic Office prior to the starting date of each season.*

- *After completing the packet, make a copy for your records and turn in the original.*
- *No athlete will be permitted to participate without completion of the CIPPE forms*

### **Changes to Personal and Emergency Information (Section 7)**

- *Please fill in all information regarding:*
  - ❑ *Current Address, Phone Number, and Cellular number.*
  - ❑ *Emergency contact and Health Insurance, including policy number and phone number.*
  - ❑ *Family physician’s name, address, and phone number.*
  - ❑ *Complete Supplemental Health History.*
  - ❑ *Be sure to sign and date this form.*

### **“Athlete/Parent/Guardian Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet and Acknowledgement of Receipt and Review Form”**

*Please read, sign, and have your child sign the attached forms and return all information to the Athletic Trainer.*