

**OLD TAPPAN BOARD OF EDUCATION**  
**APPLICATION AND AGREEMENT FOR USE OF SCHOOL FACILITIES**

*All applications must be submitted to the Board of Education Office at least thirty (30) days prior to requested use. The organization or individual applying for the use of the facilities shall be referred to as the "Licensee" and the Old Tappan BOE shall be referred to as the "Licensor."*

Date of application \_\_\_\_\_

Permit no. \_\_\_\_\_

Name of Licensee \_\_\_\_\_

Address \_\_\_\_\_

The undersigned hereby makes application for the use of the following:

| <u>School</u> | <u>Facility</u> | <u>Date</u> | <u>Time</u> |
|---------------|-----------------|-------------|-------------|
| _____         | _____           | _____       | _____       |
| _____         | _____           | _____       | _____       |
| _____         | _____           | _____       | _____       |

Nature of activity: \_\_\_\_\_

Equipment needed (microphone, projector, etc.) = \$25 deposit required

Special custodial services requested \_\_\_\_\_

Will there be an audience? \_\_\_\_\_ Will admission be charged? \_\_\_\_\_ Admission Price: \_\_\_\_\_

Purpose for which funds will be used \_\_\_\_\_

Will food or beverage to be served? \_\_\_\_\_ Number participating and attending \_\_\_\_\_

The Licensee agrees to:

1) Assume all liability for and agrees to indemnify and hold the Old Tappan Board of Education, its respective members, agents, contractors, servants, officers, employees, volunteers, licensees or invitees, harmless from and against any and all claims, losses, damages, injuries and expenses, including attorney's fees, arising out of, resulting from, or incurred in connection with any acts or omissions of the Licensee, its members, agents, contractors, servants, employees, volunteers, licensees, invitees, visitors or guests, related to its use of the Old Tappan Board of Education's facilities, including but not limited to, the Licensee's use of any portable equipment. In the event that an action or proceeding is brought against the Old Tappan Board of Education by reason of any such claim, the Licensee, upon notice from the Old Tappan Board of Education, covenants to resist or defend, at Licensee's expense such action or proceeding by counsel reasonably satisfactory to the Old Tappan Board of Education.

2) Assume full responsibility for Bodily Injury and Property Damage incurred as a result of the acts or omissions of the organization, its members, agents, contractors, servants, employees, volunteers, licensees, invitees, visitors or guests. The Licensee must present an insurance certificate guaranteeing proper liability coverage of at least a Combined Single Limit of \$1,000,000 per occurrence/\$2,000,000 aggregate insuring the Licensee against any liability for bodily injury and property damage. The Old Tappan Board of Education shall be named as an additional insured on such insurance policy. A copy of the necessary insurance policy must be presented to the Old Tappan Board of Education, prior to the Licensee's use of the facilities.

3) Assume responsibility for preserving order in said school during its use of the facilities, and for all fees in connection with the Licensee's use of the facilities, including custodial fees (if applicable).

4) Observe and adhere to all the Old Tappan Board of Education's rules and regulations governing the use of the Old Tappan Board of Education's facilities as set forth in the Old Tappan Board of Education's policies and regulations. The foregoing policies and regulations are as much a part of this application and agreement as if they were attached hereto. Additional copies of said policies and regulations may be obtained at the Old Tappan Board of Education's Business Office. Any violation of these terms and conditions may result in the immediate expulsion of the Licensee from the Old Tappan Board of Education's facilities.

5) If school is closed due to inclement weather, Licensee's event/function shall be cancelled.

6) If the Licensee is a "youth sports team organization", as that term is defined by **N.J.S.A. 18A:40-41.5(b)**, the Licensee shall provide the Old Tappan Board of Education with a statement of compliance with the Old Tappan Board of Education's Policy No. 2431.4 "Concussion Testing and Return-to-Play" for the management of concussions and other head injuries. As defined in **N.J.S.A. 18A:40-41.5(b)** a "youth sports team organization" means one or more sports teams organized pursuant to a non-profit or similar charter or which are member teams in a league organized by or affiliated with a county or municipal recreation department.

7) If the Licensee is a "youth sports team organization", as that term is defined by **N.J.S.A. 18A:40-41.5(b)**, the Licensee shall certify the statement below in accordance with **N.J.S.A. 18A:40-41.5(a)(2)**:

**\* TO BE COMPLETED BY ALL YOUTH SPORTS GROUPS ONLY:**

I hereby certify that, in accordance with N.J.S.A. 18A:40-41.5(a)(2), I have received, reviewed and will ensure compliance with the mandated Policy for the management of concussions and head injuries as prescribed by the Old Tappan Board of Education Policy #5141.23 (Concussion Management - a copy of which is attached and made a part of hereof in connection with its use of the Facilities as provided in the Agreement).

Signed by a Representative of the Youth Sports Group

Date

8) Pursuant to **N.J.S.A. 18A:40-41a** and **N.J.S.A. 2A:62A-27**, the Old Tappan Board of Education, its officers, employees, agents and servants shall not be liable for injury or death of a person arising from the presence of and access to an AED, as well as the action or inaction of the Licensee or any of the Licensee's members, agents, contractors, servants, employees, volunteers, licensees, invitees, visitors or guests.

9) The Licensee, its members, agents, contractors, servants, employees, volunteers, licensees, or invitees hereby acknowledge that the requirements of **N.J.S.A. 18A:40-41a-c** concerning automated external defibrillators apply to school-sponsored athletic events or team practices in which students of the district participate.

10) Pursuant to **N.J.S.A. 18A:40-41.5**, the Old Tappan Board of Education shall not be liable for the injury or death of a person due to the action or inaction of the Licensee or any of the Licensee's members, agents, contractors, servants, employees, volunteers, licensees, invitees, visitors or guests.

11) All charges for the use of school facilities will be paid within thirty (60) days after the Licensee's use of the facilities has been concluded.

12) If the Licensee is a "sports" organization, the Licensee shall provide the Old Tappan Board of Education with a copy of their Blanket Accident Policy, or an equivalent insurance certificate guaranteeing proper accident coverage for the participants.

13) Any requested changes or modifications in this application and agreement for the use of facilities must be made in writing by the Licensee and approved by the School Business Administrator or Old Tappan Board of Education in advance of the date scheduled for the use of facilities.

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\_\_\_\_\_ I have read and hereby represent that the Licensee shall comply with any and all of the Old Tappan Board of Education's rules, regulations, and policies.

Name of Licensee \_\_\_\_\_ Signature of Licensee \_\_\_\_\_

Position with Organization \_\_\_\_\_ Home Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ The Licensee has provided the aforementioned certificates of insurance to the Old Tappan Board of Education.

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Action of the Old Tappan Board of Education: Approval \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_

### **CONCUSSION MANAGEMENT**

Concussions are a serious and growing public health concern, especially for students participating in contact sports. According to the Centers for Disease Control and Prevention, at least 300,000 sports and recreation related concussions occur in the United State each year. The competitive athletic culture of playing through pain or “toughing it out” puts student-athletes at serious risk of brain injury, disability and death.

Allowing the student-athlete to return to play before recovering from a concussion increases the chance of more serious brain injury that can result in severe disability and/or death.

The effects of concussion, while not all preventable, can be mitigated by proper recognition and appropriate response. Therefore, the Old Tappan School District shall require that:

- A. Student-athletes and coaches employed by the school district shall receive annual training relating to concussions.
- B. Annual National Federation of State High Schools Association (NFHS) Learn Online “Concussion in Sports” Training for Coaches is required. Coaches must complete the online course and submit a certificate of completion each year.
- C. Any student-athlete suspected of sustaining a concussion or exhibiting or complaining of concussion related symptoms or any student-athlete that has sustained a concussion or has become unconscious during a practice or athletic contest be removed from play and not return to play that day.
- D. A medical evaluation be performed by the school doctor or other certified and approved medical personnel to determine the presence or absence of a concussion.
- E. If a student-athlete is diagnosed with a concussion there shall be a minimum of a 7-day wait before returning to activity. In addition, the student-athlete must be free of all concussion symptoms for 7 days prior to return to activity.
- F. Upon clearance for return to activity by the student’s primary care physician or school physician, the coach, working in conjunction, shall implement a gradual and acclimated return to activity following Zurich Consensus Statement on Concussions Guidelines.
- G. The coach shall keep the timeline for return to activity. The return to the first full activity shall be at a practice.
- H. Parents/guardians annually receive and submit the District’s Concussion Policy Acknowledgement Form prior to the student’s participation in any athletic practice or event. The form shall be submitted electronically whenever possible.
- I. The Superintendent shall develop specific regulations for return to play in concert with the school physician.

**CONCUSSION MANAGEMENT (continued)**

The signs and symptoms of concussion also impact student-athletes in their academic pursuits. This can cause deleterious effect on their ability to function in the classroom, learn new material, complete homework, and study for tests. The District shall ensure that the appropriate staff are made aware of the condition and accommodate the student athlete’s symptoms as they would with any other illness.

Because activities that require concentration and attention may exacerbate post-concussion symptoms and delay recovery, while symptomatic student-athletes who have sustained concussion should limit activities that require attention and concentration such as driving, homework, video-game playing, or texting.

**Use of school grounds by youth sports teams**

If the District allows youth sports teams to use its athletic facilities in order for the District to be immune from liability for injury or death due to the action or inaction of persons employed by or under contract with a youth sports organization the organization shall provide the District with the following in order to use the fields:

- A. Proof of an insurance policy of an amount of not less than \$50,000 per person, per occurrence insuring the youth sports team organization against liability for any bodily injury suffered by a person;
- B. A statement of compliance with the district’s policies for the management of concussions and other head injuries.

A “youth sports team organization” means one or more sports teams organized pursuant to a nonprofit or similar charter or which are member teams in a league organized by or affiliated with a county or municipal recreation department.

This policy shall be reviewed annually to ensure that it incorporates the most current information and practices.

|                                 |  |   |
|---------------------------------|--|---|
| <b><u>Legal References:</u></b> | <p><u>N.J.S.A.</u> 18A:40-41.1</p> <p><u>N.J.S.A.</u> 18A:40-41.2</p> <p><u>N.J.S.A.</u> 18A:40-41.3</p> <p><u>N.J.S.A.</u> 18A:40-41.4</p> <p><u>N.J.S.A.</u> 45:9-37.48a</p> | <p>Findings, declarations relative to head injuries of student athletes.</p> <p>Interscholastic athletic head injury safety training program</p> <p>Written policy for school district</p> <p>Removal of student athlete from competition, practice; return.</p> <p>Continuing education requirement for athletic trainer</p> |
|---------------------------------|--|---|

|                                 |   |   |
|---------------------------------|---|---|
| <b><u>Cross References:</u></b> | <p>*5141</p> <p>*5141.1</p> <p>*5141.2</p> <p>*5141.3</p> <p>*5141.21</p> <p>*6142.4</p> <p>*6145</p> <p>*6145.1/6145.2</p> | <p>Health</p> <p>Accidents</p> <p>Illnesses</p> <p>Health examinations and immunizations</p> <p>Administering medication</p> <p>Physical education and health</p> <p>Extra-curricular activities</p> <p>Intramural competition; interscholastic competition</p> |
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**Key Words**

Concussions, Removal from athletic practice or Games, Return to Athletic Participation

Approved: August 22, 2011  
 Revised:

### **CONCUSSION MANGAGEMENT**

In addition to the concussion training mandated by statute and in order to further safeguard student athletes, the district shall use NJSIAA trained officials whenever possible. If non-NJSIAA officials are used, they will be provided with training in recognizing the symptoms of concussions as will other district staff when appropriate.

All parents/guardians shall receive annually the Concussion Policy Acknowledgement Form (5141.23-E) which must be completed and signed by both the parent/guardian and student athlete and returned to the school nurse prior to participation in any practice or game. The school nurse shall keep all forms on file as part of the student record.

### **RETURN TO PLAY GUIDELINES**

1. Immediate removal from play and no return to play that day.
2. Medical evaluation to determine presence/absence of concussion.
3. Written clearance from a physician trained in the evaluation and management of concussions that states the student-athlete is asymptomatic at rest and may begin the District's protocol for graduated return-to-play.
4. Completion a symptom-free week starting on the first asymptomatic day for student-athlete diagnosed with a concussion.
5. Initiation of a gradual return to play/exercise protocol.
6. Monitoring during this time period for any reoccurrence of concussion symptoms.
7. Removal from play/exercise and return to student's primary care physician or the team doctor for re-evaluation if a re-emergence of any post concussion symptoms occurs after a return to play/exercise.
8. Return to the previous level of non-symptomatic activity and advancement as tolerated if concussion symptoms reoccur.
9. Use of available tools such as a symptom checklist, baseline and balance. Testing are suggested.

### **GRADUATED RETURN-TO-PLAY EXERCISE PROTOCOL:**

1. No activity, complete physical and cognitive rest. The objective of this step is recovery.
2. Light aerobic exercise, which includes walking, swimming or stationary cycling, keeping the intensity less than 70% maximum percentage heart rate; no resistance training. The objective of this step is increased heart rate.
3. Sport-specific exercise including running drills; no head impact activities. The objective of this step is to add movement.

**CONCUSSION MANGAGEMENT (continued)**

**GRADUATED RETURN-TO-PLAY EXERCISE PROTOCOL: (continued)**

4. Non-contact training drills involving progression to more complex training drills (e.g. passing drills). The student-athlete may initiate progressive resistance training.
5. Following medical clearance, participation in normal training activities. The objective of this step is to restore confidence and assess functional skills by the coaching staff.
6. Return to play involving normal exertional or game activity.

Approved: August 22, 2011

Revised:

## **CONCUSSION POLICY ACKNOWLEDGEMENT FORM**

In order to help protect the student athletes of New Jersey, the State of New Jersey that Old Tappan School District, and all Old Tappan athletes, parents/guardians and coaches follow the Old Tappan Concussion Management Policy.

A concussion is a brain injury and all brain injuries are serious. They may be 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/player 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:**

1. Headache.
2. Nausea/vomiting.
3. Balance problems or dizziness.
4. Double vision or changes in vision.
5. Sensitivity to light or sound/noise.
6. Feeling of sluggishness or foggy.
7. Difficulty with concentration, short-term memory, and/or confusion.
8. Irritability or agitation.
9. Depression or anxiety.
10. Sleep disturbance.

### **Signs observed by teammates, parents and coaches include:**

1. Appears dazed, stunned, or disoriented.
2. Forgets plays or demonstrates short-term memory difficulties (e.g. is unsure of the game, score, or opponent)
3. Exhibits difficulties with balance or coordination.
4. Answers questions slowly or inaccurately.
5. Loses consciousness.
6. Demonstrates behavior or personality changes.
7. Is unable to recall events prior to or after the hit.

### **What can happen if my child/player 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



**What can happen if my child/player keeps on playing with a concussion or returns too soon? (continued)**

fatal consequences. It is well known that adolescent or teenage athletes will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete's safety.

**If you think your child/player 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. Close observation of the athlete should continue for several hours.

An 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 medical doctor or doctor of Osteopathy, 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, athletic trainer (ATC), and/or athletic director, if you think that your child/player may have a concussion. 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/>

[www.nfhslearn.com](http://www.nfhslearn.com)

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We have read and understand the Concussion Policy Acknowledgement Form (5141.23-E) as well as the attached policy and regulation (5141.23 and 5141.23-R) and will report any possible instances of concussion symptoms as suggested.

\_\_\_\_\_  
Signature of Student-Athlete

\_\_\_\_\_  
Print Student-Athlete's Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Print Parent/Guardian Name

\_\_\_\_\_  
Date

Approved: August 22, 2011  
Revised: