



City of Bellevue

**Parks & Community Services**

**Compliance Statement for Concussions and Sudden Cardiac Arrest**

\_\_\_\_\_ (“Organization”) requests the use of City facilities for the purpose of youth sports and/or active recreation programs. The Organization verifies that: (1) it is in compliance with requirements of the Zackery Lystedt Law (RCW 28A.600.190) for the management of concussion and head injuries; (2) it is in compliance with the requirements of the Sudden Cardiac Arrest (SCA) Awareness Act (RCW 28A.600.195).

*By signing below, I certify that I am an authorized representative of the Organization, and that the Organization is in compliance with the requirements set forth above.*

Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Date: \_\_\_\_\_  
Title: \_\_\_\_\_

Note: Access to City facilities may not be granted until all requirements of this application are complete and approved by the City. This statement of compliance is valid for one year.