State of New Jersey DEPARTMENT OF EDUCATION

$\frac{\textbf{Sudden Cardiac Death Pamphlet}}{\textbf{Sign-Off Sheet}}$

Name of School District: South Bergen Jointure Commission
Name of Local School: SBJC Lodi Middle/High School Campus
I/We acknowledge that we received and reviewed the Sudden Cardiac Death in Young Athletes pamphlet.
Student Signature:
Parent or Guardian
Signature:
Date: