Oneonta Soccer Club

AED Device Training Acknowledgment

[Coach's Name],

I, [Coach's Name], hereby acknowledge that I have viewed a video tutorial on the proper usage of an Automated External Defibrillator (AED).

Understanding the critical role of AEDs in providing timely assistance during cardiac emergencies, I am committed to maintaining my proficiency in their usage and ensuring the safety and well-being of athletes under my supervision.

Signed,

[Coach's Signature]

Date: [Date]

\*Please return this completed form to chad.angellotti@oneontasoccerclub.org