

# Kalama Middle/High School



## Activities Handbook 2014-15

Washington School of Distinction  
2010, 2011, 2012, & 2013

Washington Achievement Award  
2010, 2011, & 2013

Washington IT Academy Lighthouse  
Award

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## INTRODUCTION

Participation in extra-curricular activities and athletics in the Kalama School District is a privilege. It is not required for graduation; it is completely voluntary. Being a member of a team or activity group requires a high level of commitment from both you and your family. If you decide to participate, be prepared to dedicate yourself to the program (s) you have chosen for the short period of time you will be involved. Remember, you will be a representative of your school and community, so act accordingly both on and off the athletic site while involved in your activity or sport. Only district authorized personnel and participating student athletes will be allowed on the field/court/playing surfaces before, during and after practices. There will be no exceptions to this rule. The safety of our student athletes and coaches is of paramount importance to the Kalama School District.

For those involved in sports, remember that some sports require the selecting of team members. This selection is not only based on athletic ability; attitude, conduct, cooperation, loyalty, and desire are also some of the characteristics that are considered in selecting athletes.

The material in this handbook pertains to those students and athletes who attend Kalama Middle and High School, and students attending Running Start through Kalama Middle/High School.

*All team/group members* must be cleared through the school office by the Athletic Director prior to being allowed to participate in practices, games and activities.

The following items must be turned in to gain office clearance before the first practice:

- Current Physical signed and dated by physician on File
- Insurance or Insurance Waiver on file
- Activities/Athletics Participation/Concussion/Inherent Risk Forms on file
- No outstanding fines
- Current grades on file in office (no exception for Running Start students)
- Running Start Eligibility Form on file (Running Start students only)
- ASB Card purchased

**After reading this handbook, you and your parents/guardians are required to sign the participation form on page 9 and return the form to the main office.**

## SECTION I - Eligibility to Represent the School (Citizenship)

Extra curricular activity participation is considered to be a privilege afforded to students who display and maintain appropriate behavior standards. In order to maintain that privilege, all students elected to ASB offices, or who represent their schools in extra-curricular activities, shall have and maintain good citizenship records, both in and out of school. Administrative procedures are to be established to promote and enforce the intent of this section.

A. Age

High school students must be under twenty (20) years of age on September 1st for fall sports, under twenty (20) on December 1st for winter sports, and under twenty (20) on March 1st for spring sports.

Middle School students (7th-8th) must not have reached their fifteenth (15th) birthday prior to June 1st of the previous school year.

B. Clearance Card:

A Clearance Card must be obtained for each student participating in any activity or sport before he/she turns out or is allowed to participate. *The card requirements includes:*

- \* Parent permission (Activity and athlete)
- \* *Student authorization (Activity and athlete)*
- \* Sport specific inherent risk form (if athlete)
- \* Concussion information sheet (if athlete)
- \* Academic eligibility (includes Running Start eligibility form)
- \* Evidence of insurance coverage (if athlete)
- \* Physical clearance by physician (see below)
- \* ASB Card
- \* No fines owing and all prior uniforms or equipment turned in

C. Athletic Physical:

All athletic participants must have passed a physical examination given by a licensed physician during the twenty-four (24) month period prior to participation in a sport. If a participant is injured or becomes seriously ill during a sport season, a doctor's release must be presented to the coach prior to resuming active participation.

D. Activities Handbook Participation Agreement:

A participation agreement signed by the student and parent(s)/guardian(s) must be on file prior to student participation in any activity or sport under the jurisdiction of Washington Interscholastic Activities Association (WIAA). Sign-off implies that the student/parent(s)/guardian(s) have read the Student Activities/ Athletic Handbook and the student agrees to participate according to its rules and regulations.

E. Insurance:

Proof of insurance must be on file at the office prior to the first practice. It must be shown that participants are covered by insurance or have an insurance waiver during the current season. *School insurance is available for students who do not have insurance.\**

*Please note: The Kalama School District does not cover athletes in case of athletic injury.*

F. ASB Card:

All members of athletic teams or activities who are using Associated Student Body purchased equipment and supplies, *including transportation*, are required to purchase an A.S.B. card.

G. Residence Rule:

A student must live in the school attendance area where he/she is attending school in order to be eligible for participation. Any questions concerning residence requirements should be referred to the Athletic Director. New students will be required to fill out a Student/Residence Eligibility form before participating.

H. Summer Sports Camps:

Athletes participating in a fall sport cannot attend a camp or clinic in that sport three weeks prior to the first day of tryouts for that sport if the participant's coach is a clinician/organizer of that camp or clinic. Participation will result in loss of athletic eligibility (17.8.0 WIAA).

**SECTION II - Rules and Regulations**

The following rules and regulations apply to those students involved in student activities/athletics under the jurisdiction of the Washington Interscholastic Activities Association (WIAA) or who elect to participate at some future point or student body sponsored activities.

Activities under the jurisdiction of WIAA include: athletics, cheerleading, music, and drama. Restrictions in these activities apply only to WIAA-sponsored competitions. Activities included in this list may change from year to year as WIAA's sponsorship of activities changes.

Consequences, where set forth in this section, shall be in addition to other school discipline sanctions when appropriate. Suspensions from participation may carry over from one activity to the next, one sport season to the next, and from one school year to the next.

A. Attendance:

Any student turning out for a sport/activity must attend all classes on the day of an event. After 10 minutes, student is considered absent and not eligible that day for practice or games. A student may be eligible for practice/games with the following absences: Doctor or dentist appointment (with documentation from doctor or parent/guardian), Funeral, Family Emergency (with documentation from parent/guardian or administrator approval). Three excused absences by parents/guardians are allowed per Semester without affecting practice or playing or activity eligibility. The student will be referred to the Athletic Director for disciplinary action if a fourth absence occurs during one Semester. Doctor or Dentist appointments with doctor documentation, Funerals, Documented Family Emergencies and Prearranged absences approved by the administration at least 24 hours in advance will not count against the student. Any exception to the attendance requirements must be approved by an administrator. If the participant is assigned ISS for the entire day of practice/game, they will be ineligible to participate on the day ISS is served.

B. School Conduct:

Activity and athletic participants are expected to be good citizens in school at all times. Disruptive behavior, persistent tardiness, truancy, and other violations of school regulations are inexcusable. Activity and athletic participants must realize that their primary purpose in attending school is to acquire an education.

Any conduct that is detrimental to the educational opportunity for all students is unacceptable and subject to disciplinary actions (refer to discipline matrix). Examples: insubordination, fighting, profanity, poor sportsmanship, etc.

C. Racial or Sexual Harassment or Discrimination:

Harassment or discrimination of an individual(s) on the basis of age, disability, national origin, race, marital status, religion, sex, or socio-economic status by words, in writing, by gestures, or actions is prohibited.

D. Sportsmanship:

Student athletes representing teams of the Kalama School District are expected to exemplify the highest standards of good sportsmanship. Sportsmanship is showing the qualities of courteousness, fairness, and respectfulness to officials, teammates, opponents, coaches, and all others associated with the sport or contest. Fighting or unsportsmanlike conduct related to athletic contests may result in probation, suspensions, or dismissal from athletic participation and/or school. Such action shall be the decision of the head coach, the athletic director and a principal.

Under WIAA rules and regulations, unsportsmanlike conduct resulting in expulsion from an interscholastic event or competition

E. Use/Possession /Distribution of illegal or legend drugs (including anabolic steroids), abuse of over the counter medications & alcohol\*

1. First Offense	Immediate suspension for no less than current sports season. Reinstatement dependent upon successful completion of assessment and counseling program.
2. Second Offense	Suspension one calendar year. Reinstatement dependent upon successful completion of assessment and counseling program.
3. Third Offense	Permanent suspension for all extra-curricular activities.

\*Legend drugs, including anabolic steroid use, possession, and/or sale, non-prescribed mood or performance enhancing/changing drugs, narcotics, hallucinatory agents. RCW 69.41.020-69.41.050.

F. Use/Possession/Distribution of tobacco

1. First Offense	40% suspension from athletic contests of current season; no travel, no practice, no contests. Suspension may be reduced to 20% with approved assessment and counseling program. There will be a one game minimum suspension.
2. Second Offense	Suspension for 1 calendar year. Reinstatement dependent upon successful completion of assessment and counseling program.
3. Third Offense	Permanent suspension from all extra-curricular activities.

G. Attendance at functions where alcohol, tobacco, or other drugs are being illegally consumed:

1. First Offense	Willful decision to remain will result in discipline as outlined in section E or F above (penalty is automatically 20% without assessment/counseling requirement).
	Willful decision to remain will result in discipline as outlined in section E or F above.
2. Second Offense	
3. Third Offense	Willful decision to remain will result in discipline as outlined in section E or F above.

AMNESTY CLAUSE

A student who has violated the drug and alcohol policy but who is not currently under investigation\* for violation of the drug and alcohol policy and has no prior violation may seek and receive help under the Amnesty Clause.

The student must admit to the policy violation and voluntarily submit to a formal drug and alcohol assessment conducted by a qualified dependency counselor, as defined by WAC 275-19, consent to an exchange of information between the qualified dependency counselor and the Kalama School District, and undergo a recommended treatment program. Failure to follow through or complete the treatment program will result in immediate suspension from athletics or extra-curricular activities for the school year.\*\*

\*\*The student will be eligible to practice, play and/or participate in his/her sport or activity during the process as long as the terms of the Amnesty Clause continue to be met.

\*Under this clause, "not under current investigation" means school or legal authorities have no knowledge of a suspected violation prior to the student and/or his/her parent(s) bringing this to the administration's attention. The student may not apply for the Amnesty Clause as a result of a current investigation.

### **SECTION III - Enforcement of Training Rules**

The head coach, the building athletic director and a principal shall be responsible for all decisions relating to disciplinary action resulting from violation of training rules. All actions leading to disciplinary action shall be based on factual knowledge, not on hearsay.

A. **Procedure:**

A student athlete who does not abide by the rules and regulations shall be subject to probation, suspension, or dismissal from the team. (Consequences for illegal substances and tobacco are intended to be more severe than other training violations.) All disciplinary actions from the team/school are "discipline" as defined in the Kalama Middle/High Student Handbook, and are subject to the procedures set forth in that policy.

B. **Disciplinary Action:**

The head coach of each sport has the prerogative to discipline an athlete who refuses to observe acceptable patterns of behavior. Such disciplinary action may include short-term suspension from the team. Unsatisfactory correction of the problem can lead to long-term suspension or dismissal from the team. Such action shall be a decision arrived at by the head coach, the athletic director and a principal.

### **SECTION IV - Athletic Guidelines and Scholastic Eligibility**

To maintain the integrity of athletics and ensure that all student athletes receive equal treatment in regard to scholastic eligibility, the following guidelines are used in the Kalama School District to determine eligibility for participation.

1. Within one (1) school/working day of ordering report cards, the Athletic Director will determine scholastic eligibility for student athletes.
2. The student and coach will be notified in person by the Athletic Director no later than the next working day. Parents will be notified by telephone, letter, or in person following notification of athlete and coach.
3. In addition, a letter will be mailed to the student's parent(s)/guardian(s) notifying them that the student is scholastically ineligible to participate in interscholastic sports.
4. The letter will indicate the duration of the probation and procedures necessary for the student to regain eligibility. It shall include:
  - The reason for the probation
  - Length of probation
  - Procedures necessary for student to regain eligibility

#### **Scholastic:**

##### **High School Policy:**

Full-time enrollment will be required of all students, including "Running Start" students until the date of graduation of the class they entered as ninth grade students occurs.

Students enrolled beyond their normal twelfth grade year and requiring three or more high school credits to graduate must be enrolled full-time.

Students that have not achieved a 2.0 GPA with no failing grades during the quarter/semester prior to the current sport season will be placed on probation. He/she may continue to practice during the probationary period. If the student is achieving a 2.0 GPA and passing all courses at the end of three weeks (three or more teaching days constitutes a week), he/she may participate in games, but will remain on probation for two more weeks. The student will be required to take a Weekly Progress Report sheet to each of his/her teachers to be filled out and signed. Once the student has obtained his/her current grade and a signature from each teacher, the form must be returned to the main office by a day and time set by the Athletic

Director. No late forms will be accepted. The Weekly Progress Report sheet will be used throughout the five week probation period. The student is completely responsible for obtaining and getting the form filled out correctly and returned to the main office on the appointed days.

**A student will be removed from participation for the remainder of the season if the following conditions are not met during probation:**

- Work with a designated teacher for a minimum of two days per week for a minimum of 25 minutes each day.
- Maintain a 2.0 GPA with all courses passed during week 3, 4 and 5 probationary grade checks.

Grades will also be checked at mid-season and before post-season, at which time the same grading standard and probationary terms apply. Mid season and post season grade checks will use the same procedure as probationary students. The Weekly Progress report will need to be filled out and returned to the main office on the days chosen by the Athletic Director.

**Probation will be granted one time per season.**

**Any student that falls below WIAA standards (must pass 5 out of 6 classes) at the end of 1<sup>st</sup> or 2<sup>nd</sup> semester will be held to the WIAA probationary period of 5 weeks from the beginning of the following semester. This will take precedence over our policy.**

**The WIAA grading standard - rather than the more rigorous district standard, will apply to students in special programs who are enrolled in regular education.** A principal and/or athletic director shall have the responsibility of determining whether the student falls within the definition of Special Program student for the purpose of this section.

Eligibility will be determined following each grading period as follows:

**Fall Sports/Activities: Prior year 2<sup>nd</sup> Semester GPA**—Grade Checks will occur: Prior to the athletes' first day of practice, the last Friday of September and 1<sup>st</sup> Friday of November.

**Winter Sports/Activities: 1<sup>st</sup> Term GPA**—Grade Checks will occur: Prior to athletes' first day of practice, the fifth Friday after the start of the season, and the last Friday of January.

**Spring Sports/Activities: 1<sup>st</sup> Semester GPA**—Grade Checks will occur: Prior to the athletes' first day of practice, the fifth Friday after the start of the season, and the last Friday of April.

### **Running Start Policy**

"Running Start" students shall be expected to meet the same eligibility standards as other students. They must:

1. Be enrolled full-time.
2. Achieve a minimum of a 2.0 GPA in any combination of college & high school classes. Running Start grade sheets are available in the office at all times and are the responsibility of the Running Start student to be turned in to the main office on the Athletic Director appointed days.

Dropping classes will make it extremely difficult to retain extra-curricular eligibility. If a student withdraws from a "Running Start" class after the second week of the college quarter, an F will be recorded for that class when computing GPA for eligibility purposes. Should a student enroll in a high school class following a "Running Start" withdrawal and is able to earn credit and a grade, the high school class grade will replace the F recorded for GPA purposes. Registration as a "Home School" student will not satisfy requirements for eligibility.

Eligibility will be determined following each grading period as follows:

**Fall Sports/Activities:** Prior year 2<sup>nd</sup> Semester GPA

**Winter Sports/Activities:** Prior year 2<sup>nd</sup> Semester GPA until Fall 1<sup>st</sup> Term GPA is issued

**Spring Sports/Activities:** 1<sup>st</sup> Semester GPA

A student may gain or lose eligibility during a sport season. The GPA of students taking a combination of "Running Start" and high school classes will be a pro-rated combination of the grades received at the college and at the high school. Due to uncommon schedules, eligibility of a student who takes a combination of courses between the college and the high school will be determined after receiving a semester grade from the high school.

### **Middle School Policy:**

Students that have not achieved a 2.0 GPA will receive a RED card. Also, students with one or more failing grades during the quarter/semester prior to the current sport season will be placed on a RED card. He/she may continue to practice during the RED card period. The student will be required to take a Weekly Progress Report sheet to each of his/her teachers to be filled out and signed. If the student is achieving a 2.0 GPA and passing all courses at the end of one week, he/she may participate in games. The Weekly Progress Report sheet will be used throughout the season to determine continuing eligibility. Once the student has obtained his/her current grade and a signature from each teacher, the form must be returned to the main office by a day and time set by the Athletic Director. No late forms will be accepted. The Weekly Progress Report sheet will be used throughout the five week probation period. The student is completely responsible for the form being filled out completely and returned to the main office on the appointed days. Note: only eligible students with a GREEN card may suit up for games and travel with the team.

### **SECTION V - Equipment**

#### **A. Issued Equipment:**

1. School equipment checked out by the student athlete is his/her responsibility. He/she is expected to keep it clean and in good condition.
2. Loss or damage to issued equipment will be the student's financial obligation.
3. Issued equipment is to be used only while participating with the team in practice or during a contest. (If coaches desire, players may wear their jerseys to school on game days. However, they are not to be worn at other times without their coach's prior permission.)
4. Any exceptions to these rules must be authorized by the athletic director and conform to WIAA regulations regarding use of school equipment.

#### **B. School Equipment:**

1. The school district provides students with excellent physical facilities for athletics at great expense to parents/guardians and community members in the form of taxes. Therefore, it is important that students exercise care and personal regard for these areas.
2. Misuse of dressing areas, lockers, equipment, supplies, gymnasium, or fields will not be tolerated. Failure to comply with this regulation may result in the denial of use of the facilities.
3. A.S.B. athletic equipment can only be used for A.S.B. activities. Uniforms cannot be used for any non-WIAA sponsored contest in any sport.
4. Students will be assessed fine slips for lost or damaged A.S.B. issued or used equipment at replacement value.

### **SECTION VI - Travel**

- A. Transportation to and from activities/athletic contests for athletes/activity participants away from the local area will be provided by the Kalama School District and revenue from A.S.B's.
- B. A student must travel to and from athletic contests with the team. A participant may be released only to his/her parent. Any special circumstances must be pre-approved by a principal/athletic director prior to leaving Kalama.

- C. Team members are under the direct supervision of the coaching staff or designee while attending away games. If students are transported in school cars, an adult (21 years or older) must drive, be responsible for students to and from the game site, and be approved by a principal or athletic director.
- D. An athlete must refrain from misconduct while traveling to and from contests and during his/her stay at that particular event.
- E. Any student directly involved in causing damage at a certain school may be required to pay or to assist in paying for the damage.
- F. The coaching staff and bus driver will govern students' actions on the bus in accordance with Administrative Regulation #5424 - Rules for Students Riding Kalama School Buses.
- G. While traveling, student athletes should dress appropriately and in good taste.
- H. Students should try to inform parents as to an approximate return time so they will be waiting at the gym pick-up area.

If the above travel procedures are not adhered to, the student/athlete may be disciplined in accordance with procedures outlined in sections I and II of this handbook.

### **SECTION VII - Amateur Standings**

An amateur athlete is one who participates in athletics strictly for the physical, mental, social, and educational benefits derived from the sport. You may become ineligible if you:

- A. Accept merchandise of more than \$100.00 in value.
- B. Accept cash awards.
- C. Enter competition under a false name.
- D. Accept payment of expense allowances over the actual and necessary expenses of the athletic trip.
- E. Sign a contract to play for a professional team whether for money or not.
- F. Accept directly or indirectly a salary or any other form of financial assistance such as a scholarship or grant-in-aid from a professional team.

### **SECTION VIII - Awards**

An athletic award is a symbol of athletic accomplishment, good sportsmanship, and observance of athletic policies. Since the award is a symbol of accomplishment, its value lies in its implication rather than in its monetary worth.

- A. In order to qualify for an athletic letter, a student athlete must meet the requirements set forth by the head coach of the sport and be recommended by the head coach.
- B. Athletic letters and awards shall only be presented to participants who complete the entire season for a given sport unless forced to quit early due to injury or illness. If this occurs, the head coach may recommend qualification.
- C. Athletes can earn one varsity letter; subsequent varsity competition will allow an athlete a pin or emblem.
- D. Letters and certificates will be presented at an award's ceremony at the end of each sport season. Students should dress appropriately for the presentation.
- E. Student athletes will be recognized for their scholastic achievements at the award's ceremonies.

## **SECTION IX - College Recruiting Process**

Some athletes may have aspirations of participating in college sports. **BE AWARE;** there are specific procedures that must be followed to remain eligible to receive college athletic scholarships. PLEASE see the Athletic Director for a Recruiting Packet if you are interested in pursuing this course of action.

## **SECTION X - Appeal Procedure**

If you are declared ineligible by your school because of a WIAA eligibility regulation, you may appeal your case to the District IV Eligibility Board. See your coach or athletic director for full details. This doesn't pertain to training violations. If a request for an appeal is made after the deadline dates set by the District IV Eligibility Committee, and the school district is not responsible for the delay of the appeal, the student and/or parent/guardian shall be liable for any expense incurred by the committee.

## **SECTION XI - Sports Safety Guidelines**

Each sport issues Safety Guidelines as recommended by WIAA and accepted by the Kalama School District. These guidelines must be signed by the athlete and parent/guardian and placed on file in the athletic office previous to participation.

## **SECTION XII - Grievance Procedure -- Informal Conference**

Any athlete, parent/guardian who is aggrieved by any athletic discipline, athletic suspension or athletic expulsion has the right to an informal conference with the principal or his/her designee and any other staff member involved. Any request for an informal conference will be made within (5) school days of the receipt of the written notice of the action taken.

At the informal conference, the athlete, parent/guardian shall be subject to questioning by the principal or his/her designee and shall be entitled to question school personnel involved in the matter being grieved.

Any athlete, parent/guardian who may be aggrieved following the informal conference may, upon three (3) school days prior notice, present a written and/or oral grievance to the Superintendent or to his/her designees. If the grievance is not resolved, the student, parent/guardian, upon three (3) school days prior notice, may present a written and/or oral grievance to the Board of Directors to be dealt with at its next regularly scheduled or special meeting. Any such grievance request shall be made within five (5) school days after previous decisions have been rendered.

The Board of Directors shall notify the student and the student's parent/guardian in writing of its decision within ten (10) school days following the meeting.

The student's discipline, student's suspension or student's expulsion shall continue notwithstanding with implementation of the grievance procedure, unless the principal elects to postpone such action.

## **Quitting a Team**

You should understand that if you are a member of an athletic team and quit for some reason other than injury, health or consent of participating coaches, you forfeit your right to participate in another athletic event for the remainder of that sport season. You may also lose the right to use A.S.B. equipment of any type for extra-curricular activities. (In the event you are "cut" from a team, you may turn out for another sport, subject to the approval of the coaches of the new sport.) If you decide that a particular sport is not for you and wish to try a new sport, in order to be eligible for the new sport, you must turn out prior to the first contest. Otherwise the opportunity to turn out will not be allowed.

## Letter Awards -HS Qualifications

Football: Play fourteen quarters; finish the season in good standing

Volleyball: Play and finish the season on the varsity squad

Girls Soccer: Play and finish the season on the varsity squad

Cross Country: Run varsity twice, second full season of competition, seniors ending season in good standing

Golf: Determined by supervisor

Wrestling: Wrestle in half the matches (10) and the league tournament

Boys Basketball: Play twelve quarters in the regular season or remain on the varsity team throughout the entire season

Girls Basketball: Play twelve quarters in the regular season or remain on the varsity team throughout the entire season

Track: Complete the season and earn ten points by placing at meets or sub districts

Baseball: Play in 25 Varsity Innings

Softball: Play in one-third of the varsity games

Cheerleading: Complete the season for which they are cheering in good standing and attend all games and practices

Pep Band: Determined by supervisor

Drama Club: Determined by supervisor



# KALAMA MIDDLE/HIGH SCHOOL ATHLETIC/ACTIVITY PARTICIPATION

ATHLETE'S LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_  
(Print your name please)

2014-15 GRADE LEVEL \_\_\_\_\_ DATE \_\_\_\_\_

Parent/guardian's Legal Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Student's Physical Address (if different) \_\_\_\_\_

Parent/Guardian E-mail address (es) \_\_\_\_\_

Student E-mail address \_\_\_\_\_

## PARTICIPATION CHECKLIST

(please mark all that apply) or mark ALL  \_\_\_\_\_

### Fall sports

- Cross Country
- Football
- Golf (Mens)
- Soccer (Womens)
- Volleyball
- Cheerleading

### Winter Sports

- Basketball (Mens)
- Basketball (Womens)
- Wrestling
- Cheerleading

### Spring Sports

- Baseball
- Fastpitch Softball
- Track & Field

### Activities

- ASB Leadership
- Drama
- Knowledge Bowl
- Pep Band
- Other

## ELIGIBILITY QUESTIONS

- | <u>YES</u>               | <u>NO</u>                |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Are you currently enrolled at Kalama High School?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Are you currently receiving a HOME-BASED education? (If yes, you must show you are registered at the KSD office.)  |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Do you reside within the Kalama School District?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Do you reside with your Parent(s) or Legal Guardian(s), and at their Legal Address, as recorded in the address listed above?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Are you a new student to the Kalama School District? Please attach your last report card to this form.<br>If yes, where & when did you last attend? _____<br>If yes, were you an athlete in good standing at your previous school? _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Are you a foreign exchange student?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Are you a Running Start Student? If yes, attach the WIAA Running Start Form.   |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. All sports related fines paid? If you are having financial difficulty, please contact the ASB office @ 673-5212.   |

**\*\*\*A full time student, as defined by WIAA, is a student enrolled in a minimum of 5 or 6 classes\*\*\*  
(Seniors on track to graduate may have one less)**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Did you attend school full time last semester?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Are you currently enrolled as a full time student?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. Did you pass and earn credit in all of your classes in the previous term?                                       |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. Have you repeated any grade(s) or withdrawn from school since 7 <sup>th</sup> grade? If yes, when? _____        |
| <input type="checkbox"/> | <input type="checkbox"/> | 13. Have you read the Athletic/Activity Handbook and agree to follow the guidelines set forth and contained within? |

## ATHLETIC/ACTIVITY INSURANCE INFORMATION

(This section to be completed by *Parent/Guardian*)

Students must be covered by medical insurance provided by parent/guardian for the duration of the activity (ies) in which they participate. Inform the school immediately should there be a change in insurance coverage.

Parent/Guardian, please initial at least one of the following to indicate current coverage:

- \_\_\_\_ 1. Complete personal coverage with \_\_\_\_\_  
(name of insurance company & policy number)
- \_\_\_\_ 2. Student insurance plan (to be purchased by parent/guardian prior to participating in activity.)

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Name of Family Physician	Address	Phone
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A current **Sport** Physical must be on file in office. Physicals are good for 2 years from date given. Physical date must cover entire season student is participating in.

Do you give permission for a physician to administer treatment to your child and to inform school officials of the health of the student as he/she participates in athletics? Yes  No

It is the parent's/guardian's responsibility to notify the school any time a medical problem occurs that would affect the health of the student as he/she participates in athletics. Are there any medical conditions that the school should be aware of?

---

**Emergency Contact:** \_\_\_\_\_  
Name Phone number/Cell number

**I understand that failure to meet any of the above criteria is grounds for the student to be declared ineligible.**

I have read and understand the implications of the rules and regulations governing the participation of my son/daughter in WIAA activities/athletics sponsored by the Kalama School District. I hereby give my consent for him/her to engage in school and state association approved activities/athletics as a representative of his/her school. I understand that he/she is expected to follow the rules and regulations of participation as outlined in our Student Activities/Athletic Code, the Athletic and Student Handbooks, and coach requirements, and should he/she violate those provisions, he/she will be disciplined in accordance with procedures listed in the code.

### FALSE INFORMATION MAY RESULT IN LOSS OF ATHLETIC ELIGIBILITY AND FORFEITURE OF TEAM GAMES

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Student/Athletic Signature	Date
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Parent/Legal Guardian Signature	Date
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Parent Contact Numbers	Parent Contact Numbers	Parent Contact Numbers
------------------------	------------------------	------------------------

THIS HANDBOOK FORM (*completely filled out and signed by parent/guardian and student*) MUST BE RETURNED TO THE OFFICE **PRIOR TO THE FIRST INTERSCHOLASTIC PRACTICE** IN ORDER FOR THE ATHLETE/PARTICIPANT TO PARTICIPATE!

**Office Use Only:** Clearance Card Issued: yes  no  Probation Card Issued: yes  no   
ASB Card: yes  no  (must have ASB prior to first practice) Current Physical on File: yes  no  Parent Signature: yes  no   
Athlete/Participant Signature: yes  no  Grade Check completed: yes  no  Academic probation: yes  no   
Running Start Form on file yes  no  Certificate of Residence Form on file yes  no

# KALAMA SCHOOL DISTRICT

## Concussion Information Sheet 2014-15



A concussion is a brain injury and all brain injuries are serious. They are 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 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:**

- Headaches
- “Pressure in head”
- Nausea or vomiting
- Neck pain
- Balance problems or dizziness
- Blurred, double, or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish or slowed down
- Feeling foggy or groggy
- Drowsiness
- Change in sleep patterns
- Amnesia
- “Don’t feel right”
- Fatigue or low energy
- Sadness
- Nervousness or anxiety
- Irritability
- More emotional
- Confusion
- Concentration or memory problems (forgetting game plays)
- Repeating the same question/comment

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

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays lack of coordination
- Answers questions slowly
- Slurred speech
- Shows behavior or personality changes
- Can’t recall events prior to hit
- Can’t recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness

## What can happen if my child keeps on playing with a concussion or returns to 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 fatal consequences. It is well known that adolescent or teenage athlete 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 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, without medical clearance. Close observation of the athlete should continue for several hours. The new "Zackery Lystedt Law" in Washington now requires the consistent and uniform implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

"a youth 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 licensed health care provider 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 if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. 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/>

To watch an informational video you can go to:

<http://www.wiaa.com/lystedtvideo.htm>

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(Please hand in only signatures - cut here)

I have read and understand the Kalama School District Concussion Informational handout.

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Student-athlete Name Printed

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Student-athlete Signature

---

Date

---

Parent or Legal Guardian Printed

---

Parent or Legal Guardian Signature

---

Date



**INHERENT RISK FORM FOR 2014-15 SPORTS:  
BASKETBALL, VOLLEYBALL, BASEBALL, CROSS COUNTRY,  
SOFTBALL, TRACK, SOCCER, CHEER**

This school strives to protect each student from possible injury while engaging in school activities. The guidelines and information identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and well-fitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach and must understand that failure to follow such directions or adhere to standards may place the participant at risk. Travel to and from off-campus facilities shall be in accordance with the directions of the activity coach.

Guidelines for all sports are as follows:

1. Make certain that you wear all equipment that is issued by the coach. Advise the coach of any poorly-fitted or defective equipment.
2. Advise the coach if you are ill, or have any prolonged symptoms of illness.
3. Advise the coach if you have been injured.
4. Engage in warm-up activities prior to strenuous participation.
5. Be alert for any physical hazards in the locker room or in or around the participation area. Advise coach of any hazard.
6. Because of the dangers of school sports, I recognize the importance of following coaches' instructions regarding techniques, training and other team rules, etc., and agree to obey such instructions.

**BASKETBALL:**

1. Recognize the possible danger from such actions as "undercutting" a player, hanging on the basket, throwing a "wild" pass.

**CHEER:**

1. Practice stunt prior to the event that you will perform in. Stunts can be very dangerous if not spotted correctly.
2. Lead cheers at the appropriate time so you will be aware of ball and players' positioning to prevent possible injury.
3. Be aware of supervisory staff of both teams and where they can be located so they may be contacted in case of an emergency or an undesirable crowd control situation.

Most cheerleading practice areas are constructed with extremely hard surfaces. Athletes who fall during participation risk potentially dangerous injury - especially to knees, elbows or head. Injury may include damage to joints, broken bones, or serious head and eye injury. Travel to and from off-campus facilities shall be in accordance with the directions of the activity coach.

**CROSS COUNTRY:**

1. Run only on the course prescribed by the coach.
2. Run in pairs in unfamiliar territory or in areas where there are few people.
3. Watch for objects being thrown from passing cars.
4. Approach dogs with caution.
5. Be familiar with basic first aid treatment for heat exhaustion, heat stroke, sprained ankle, or other runner related injuries.
6. Face the oncoming traffic when running on roads. Be cautious at intersections and be acutely aware of erratic drivers and the location of vehicles at all times.

**SOCCER:**

1. Use equipment that complies with FIFA and/or WIAA rules, e.g., footwear, shin guards.
2. Comply with soccer rules with special attention given to avoiding such violations as:  
Kicking or attempting to kick an opponent, tripping an opponent, jumping at an opponent, charging an opponent from behind, charging violently at an opponent, striking or attempting to strike an opponent, holding an opponent, pushing an opponent, playing in a manner considered by the referee to be dangerous such as kicking at a shoulder high ball when an opponent is trying to head it.

**VOLLEYBALL:**

1. Be aware of court surroundings, i.e., obstacles, projections, bleachers, standards, etc.
2. The above information has been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the volleyball program.

**WRESTLING:**

1. Recognize illegal holds as defined by the rule book.
2. Wear approved proper-fitting apparel when wrestling with an opponent, either in practice or in a match.
3. Wrestle a safe distance from all walls and other obstructions. All wrestling will be done on the mats provided for wrestling.

**TRACK AND FIELD:**

1. Recognize the safety rules for restricted areas, e.g., javelin, discus, shot put, pole vault. These areas must be supervised.
2. Stay on the designated running courses.
3. Check equipment, apparatus, field and pits thoroughly before each use, e.g., debris in jumping pits, placement of standards.

**BASEBALL/SOFTBALL:**

1. Recognize your surroundings: i.e., batters warming up, thrown bats, batted or thrown balls, on deck circle (one person at a time).
2. Use hard hats while batting/running bases/hitting in batting cages (Baseball).
3. Familiarize yourself with surroundings and grounds, i.e., fences, field conditions such as holes, lips on infield edges, etc. when playing on away fields.
4. Be aware of the potentially serious injuries to your ankles, knees, and legs if you do not follow the correct procedures in base running. Sliding head first into bases should be avoided.
5. Follow instructions regarding communication between players; i.e., talking and calling each other off on "pop flies" and Texas leaguers, etc.

I am aware that my athlete will be participating in a **HIGH-RISK SPORT (s)** and that practicing or competing in the sport (s) will be a dangerous and unpredictable activity involving **MANY RISKS OF INJURY**. I understand that each sport has unique guidelines to follow. I understand that the dangers and risks of practicing and competing include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, blindness, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of my body, general health and well-being. I understand that the dangers and risks of practicing or competing in a sport may result not only in serious injury, but in a serious impairment of my athlete's future abilities to earn a living, to engage in other business, social and recreational activities and generally to enjoy life.

I understand that all school sports are High-Risk Sports, including but not limited to those risks outlined above. In consideration of the Kalama School District permitting my child/ward to try out for the Kalama Middle or High School sport program (s) of his/her choice, and to engage in all activities related to the team, including, but not limited to, trying out, practicing or competing in the sport, I hereby assume all the risks normally associated with the sport and agree to hold the school district, its employees, agents, representatives, coaches and volunteers harmless from any and all actions, causes of action, debts, claims or demands of every kind and nature whatsoever which may arise from such risks. The terms hereof shall serve as a release for my heirs, estate, executor, administrator, assignees, and for all members of my family. We agree that neither the school district, nor the staff of the school district, nor the student organization of the school district shall in any way be held liable for any accident or injury in any way received on account of or while engaged in any athletic activity sponsored by the district. We further agree that neither the district nor any of their staff or student organizations shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries. We also acknowledge that it is our responsibility to provide for any medical, disability or other insurance to mitigate any costs that may be unfortunately incurred as a result of participation in this activity.

The above information has been explained to me, I have carefully read each guideline, warning and release, and I understand the list of rules, procedures and terms. I also understand the necessity of using the proper techniques while participating in a sport program through Kalama Middle/High School.

By signing below, I certify that I have read the above, understand its content, and agree to its terms regarding each sport that my athlete will participate in during the school year.

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Athlete's Signature Date

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Parent's/Guardian's Signature Date

# KALAMA HIGH SCHOOL GOLF INHERENT RISK

2014-15 SCHOOL YEAR

This school strives to protect each student from possible injury while engaging in school activities. The guidelines and information identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and well-fitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach and must understand that failure to follow such directions or adhere to standards may place the participant at risk. Travel to and from off-campus facilities shall be in accordance with the directions of the activity coach.

Guidelines are as follows:

1. Make certain that you wear all equipment that's issued by the coach. Advise the coach of any poorly-fitted or defective equipment.
2. Advise the coach if you are ill or have any prolonged symptoms of illness.
3. Advise the coach if you have been injured.
4. Engage in warm-up activities prior to strenuous participation.
5. Be alert for any physical hazards or other hazards in the locker room or in or around the participation area. Advise coach of any hazard or concern.
6. Before swinging a club, make certain that the area around you is clear of others. Be careful after hitting not to throw the club as you could injure someone.
7. Be aware of the danger of standing in front of or on the side of a person who is attempting to hit the ball, as one may be injured by the ball or by the rebounding of the ball from trees, signs, markers, etc.
8. Be aware at all times of other players' positions on the course when you are hitting or when they are hitting. You are vulnerable at all times. Do not hit the ball until proper distance is available between golfing groups. If you observe a ball off course, make any nearby group aware of its existence by shouting or other appropriate means.
9. Keep hands and grips dry to minimize the danger of clubs being released.

The above information has been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the golf program.

I am aware that Golf is a **HIGH-RISK SPORT** and that practicing or competing in golf will be a dangerous and unpredictable activity involving **MANY RISKS OF INJURY**. I understand that the dangers and risks of practicing and competing in golf include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, blindness, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of my body, general health and well-being. I understand that the dangers and risks of practicing or competing in Golf may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities and generally to enjoy life. I understand that the, due to the nature of the sport, the exact make-up of a golf course may be unknown or contain unidentifiable hazards or circumstances. We agree that neither the school district, nor the staff of the school district, nor the student organization of the school district shall in any way be held liable for any accident or injury in any way received on account of or while engaged in any athletic activity sponsored by the district. We further agree that neither the district nor any of their staff or student organizations shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries. We also acknowledge that it is our responsibility to provide for any medical, disability or other insurance to mitigate any costs that may be unfortunately incurred as a result of participation in this activity.

By signing below, I certify that I have read the above, understand its content, and agree to its terms.

\_\_\_\_\_  
Athlete's Name

\_\_\_\_\_  
Athlete's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Name

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date



Pride

Unity

Respect

Excellence

“The Chinook Way”



## FOOTBALL INHERENT RISK

2014-2015 SCHOOL YEAR

This school strives to protect each student from possible injury while engaging in school activities. The guidelines and information identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and well-fitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach and must understand that failure to follow such directions or adhere to standards may place the participant at risk.

Travel to and from off-campus facilities shall be in accordance with the directions of the activity coach.

Guidelines are as follows:

1. Make certain that you wear all equipment that is issued by the coach. Advise the coach of any poorly-fitted or defective equipment.
2. Advise the coach if you are ill or have any prolonged symptoms of illness.
3. Advise the coach if you have been injured.
4. Engage in warm-up activities prior to strenuous participation.
5. Be alert for any physical hazards in the locker room or in or around the participation area. Advise coach of any hazard.

### TACKLING, BLOCKING, AND RUNNING THE BALL

Tackling and blocking techniques are basically the same. Contact is to be made above the belt, but not initially with the helmet. The player should always be in a position of balance, knees bent, back straight, body slightly bent forward, head up and the target area as near to the body as possible with the main contact being made with the shoulder. When properly blocking or tackling an opponent, contact with your helmet will naturally result. Therefore, technique is most important in order to prevent or reduce the likelihood of injury. Blocking and tackling by not keeping the helmet as close to the body as possible may result in a shoulder injury and a separation or a pinched nerve in the neck area. Injuries as a result of improper techniques can range from minor to disabling or even death. Improper body alignment can put the spinal column in a vulnerable position for injury. The development of strength in the neck muscles through isometric-type exercises will enable the participant to hold his/her head up even after getting tired during a workout or contest.

### BASIC HITTING (CONTACT) POSITION AND FUNDAMENTAL TECHNIQUE

Strained muscle injuries can range from ankle injuries to serious knee injuries requiring surgery. The rules have made blocking below the waist (outside a two-yard by four-yard area next to the football) illegal. Cleats are restricted to no more than one-half inch to further help prevent knee injuries. A runner with the ball, however, may be tackled around the legs. In tackling, the rules prohibit initial contact with the helmet or grabbing the face mask on the edge of the helmet. Initial helmet contact may result in a bruise; dislocation; broken bone; head injury; or internal injury such as kidneys, spleen, bladder, etc. Grabbing the face mask or helmet edge may result in a neck injury which could result in injuries ranging from a muscle strain to a dislocation, nerve injury, or spinal column damage which could cause paralysis or death.

### EQUIPMENT

An athlete is required to wear all issued equipment. If equipment is damaged or does not fit correctly, the athlete must inform his coach immediately before use. Shoulder pads, helmets, hip pads, and pants (including thigh pads and knee pads) must have proper fitting and use.

A shoulder pad which is too small will leave the shoulder point vulnerable to bruises or separations. A shoulder pad that is too tight in the neck area may result in a possible pinched nerve. A shoulder pad which is too large will leave the neck area poorly protected and will slide on the shoulders making them vulnerable to bruises or



## PREPARTICIPATION HISTORY AND PHYSICAL EXAMINATION

(The Sport Physical is valid for 2 years from date of examination, but the expiration date **MUST COVER the ENTIRE sport season** the athlete wishes to participate in to be valid)

Student Name: \_\_\_\_\_ 2014-2015 Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Sport: \_\_\_\_\_ Exam Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Insurance Plan Number: \_\_\_\_\_

Do you give your permission for a physician to administer treatment to your child and to inform school officials of the health of the student as he/she participates in athletics? Yes  No  (It is the parent/guardian's responsibility to notify the school any time a medical problem occurs that would affect the health of the student as he/she participates in athletics.)

Student Birth Date: \_\_\_\_\_ Student Signature: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### HISTORY

- |      | Yes                      | No                       |  |
|------|--------------------------|--------------------------|--|
| 1a.  | <input type="checkbox"/> | <input type="checkbox"/> | Have you had any illness/injury recently, or do you have an illness/injury now?                    |
| b.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you had a medical problem, illness or injury since your last exam?                            |
| c.   | <input type="checkbox"/> | <input type="checkbox"/> | Do you have any chronic or recurrent illness?  |
| d.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had any illness lasting more than a week?  |
| e.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever been hospitalized overnight?   |
| f.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you had any surgery other than tonsillectomy?   |
| g.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had any injuries requiring treatment by a physician?                                 |
| h.   | <input type="checkbox"/> | <input type="checkbox"/> | Do you have any organ missing other than tonsils (appendix, eye, kidney, testicle, etc.)?          |
| 2.   | <input type="checkbox"/> | <input type="checkbox"/> | Are you presently taking ANY medications (including birth control pill, vitamin, aspirin, etc.)?   |
| 3.   | <input type="checkbox"/> | <input type="checkbox"/> | Do you have ANY allergies (medicines, bees, foods, or other factors)?                              |
| 4a.  | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had chest pain, dizziness, fainting, passing out during or after exercise?           |
| b.   | <input type="checkbox"/> | <input type="checkbox"/> | Do you tire more easily or quickly than your friends during exercise?                              |
| c.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had any problem with your blood pressure or your heart?                              |
| d.   | <input type="checkbox"/> | <input type="checkbox"/> | Have any close relatives had heart problems, heart attack or sudden death before they were age 50? |
| 5.   | <input type="checkbox"/> | <input type="checkbox"/> | Do you have any skin problems (acne, itching, rashes, etc.)?                                       |
| 6a.  | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had fainting, convulsions, seizures or severe dizziness?                             |
| b.   | <input type="checkbox"/> | <input type="checkbox"/> | Do you have frequent severe headaches?   |
| c.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had a "stinger" or "burner" or "pinched nerve"?                                      |
| d.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever been "knocked out" or "passed out"?  |
| e.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had a neck or head injury?   |
| 7a.  | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had heat exhaustion, heat stroke, heat cramps or similar heat-related problems?      |
| 8.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you had asthma, or trouble breathing, or cough during or after exercise?                      |
| 9a.  | <input type="checkbox"/> | <input type="checkbox"/> | Do you wear eyeglasses, contact lenses or protective eye wear?                                     |
| b.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you had any problem with your eyes or vision?   |
| 10.  | <input type="checkbox"/> | <input type="checkbox"/> | Do you wear any dental appliance such as braces, bridge, plate, retainer?                          |
| 11a. | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had a knee injury?   |
| b.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had an ankle injury?   |
| c.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever injured any other joint (shoulder, wrist, fingers, etc.)?                            |
| d.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had a broken bone (fracture)?  |
| e.   | <input type="checkbox"/> | <input type="checkbox"/> | Have you ever had a cast, splint, or had to use crutches?  |
| f.   | <input type="checkbox"/> | <input type="checkbox"/> | Must you use special equipment for competition (pads, braces, neck roll, etc.)?                    |
| 12.  | <input type="checkbox"/> | <input type="checkbox"/> | Has it been more than 5 years since your last tetanus booster shot?                                |
| 13.  | <input type="checkbox"/> | <input type="checkbox"/> | Are you worried about your weight?   |
| 14.  | <input type="checkbox"/> | <input type="checkbox"/> | FEMALES: Have you any menstrual problems?  |
| 15.  | <input type="checkbox"/> | <input type="checkbox"/> | Have you any medical concerns about participating in your sport?                                   |

\*\*\*\*\* ATHLETE SHOULD NOT WRITE BELOW THIS LINE \*\*\*\*\*

**PHYSICAL EXAMINATION 2014-15**

**(MUST BE COMPLETELY FILLED OUT – PHYSICIAN NAME MUST BE LEGIBLE)**

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**PHYSICIAN'S COMMENTS ON ALL "YES" ANSWERS (REVERSE SIDE- refer to question number):**

Age: \_\_\_\_\_ Pulse: \_\_\_\_\_  
Height: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_  
Weight: \_\_\_\_\_  
Visual Acuity: Left 20/ \_\_\_\_\_ Right 20/ \_\_\_\_\_

Optional

Urinalysis: _____
Body Fat %: _____
HCT: _____
EST VO2 Max: _____
Audiometry: _____

Normal		Abnormal	
<input type="checkbox"/>	1. Head	<input type="checkbox"/>	_____
<input type="checkbox"/>	2. Eyes (pupils), ENT	<input type="checkbox"/>	_____
<input type="checkbox"/>	3. Teeth	<input type="checkbox"/>	_____
<input type="checkbox"/>	4. Chest	<input type="checkbox"/>	_____
<input type="checkbox"/>	5. Lungs	<input type="checkbox"/>	_____
<input type="checkbox"/>	6. Heart	<input type="checkbox"/>	_____
<input type="checkbox"/>	7. Abdomen	<input type="checkbox"/>	_____
<input type="checkbox"/>	8. Genitalia	<input type="checkbox"/>	_____
<input type="checkbox"/>	9. Neurologic	<input type="checkbox"/>	_____
<input type="checkbox"/>	10. Skin	<input type="checkbox"/>	_____
<input type="checkbox"/>	11. Physical Maturity	<input type="checkbox"/>	_____
<input type="checkbox"/>	12. Spine, Back	<input type="checkbox"/>	_____
<input type="checkbox"/>	13. Shoulders, Upper extremities	<input type="checkbox"/>	_____
<input type="checkbox"/>	14. Lower extremities	<input type="checkbox"/>	_____

Assessment:  Full participation  Limited participation (describe limitations, restrictions): \_\_\_\_\_

Participation contraindicated (list reasons): \_\_\_\_\_

Recommendations (equipment, taping, rehabilitation, etc.): \_\_\_\_\_

DATE OF PHYSICAL: \_\_\_\_\_ PHYSICIAN'S SIGNATURE: \_\_\_\_\_

PHYSICIAN'S PHONE: ( ) \_\_\_\_\_ PRINT PHYSICIAN'S NAME: \_\_\_\_\_