

# *Loyalton Grizzlies*

## **Athletic Packet**

Revised 5/2017



**The forms and information included in this packet are necessary for Loyalton High School students to read and complete in order for allowance to participate in our athletic programs. It is our hope to provide a safe and productive experience for all involved and this material is vital for that purpose. All forms must be signed and turned in to the coach before any participation in practice or play may occur.**

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SIERRA-PLUMAS JOINT UNIFIED SCHOOL DISTRICT  
SIERRA COUNTY OFFICE OF EDUCATION  
EMERGENCY MEDICAL FORM

1

Student Name: \_\_\_\_\_

Student Date of Birth: \_\_\_\_\_ Last Tetanus Toxoid Booster: \_\_\_\_\_

Allergies to Drugs or Foods: \_\_\_\_\_

Special Medications or Pertinent Medical Information: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Physician's Address: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Insurance Policy Number: \_\_\_\_\_

I (We), the undersigned parent, parents, or legal guardian(s) of the student listed above, a minor, do hereby authorize and consent to any x-ray examination, anesthetic, medical, or surgical diagnosis rendered under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medicine Practice Act or a Dentist licensed under the provisions of the Dental Practice Act and on the staff of any acute general hospital holding a current license to operate a hospital from the State of California Department of Public Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required, but is given to provide authority and power to render care which the aforementioned physician, in the exercise of his/her best judgment, may deem advisable. It is understood that effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached.

This authorization is given pursuant to the provisions of  
Section 25.8 of the *Civil Code of California*.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature(s) of Father, Mother, and/or Legal Guardian

Address: \_\_\_\_\_

PO Box or Street

City

State

ZIP

Mother Cell/Home: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Father Cell/Home: \_\_\_\_\_ Work Phone: \_\_\_\_\_

This consent shall remain effective through June 30 of the current school year.

# LOYALTON HIGH SCHOOL

## *INTERSCHOLASTIC SPORTS AGREEMENT*

Participation in interscholastic sports at Loyalton High School requires of athletes and parents a serious commitment of time, energy, and team cooperation. Athletes are expected to maintain good grades, to conduct themselves at school, games, and practices in a cooperative and respectful manner and to refrain from debilitating vices like tobacco, alcohol, marijuana, and other illegal drugs. Unfortunately, a limited school budget dictates that athletes and parents shoulder part of the expense of the sport participation as well. Listed below are specific expectations of Loyalton High athletes. It is our hope that parents will read and accept these expectations and help their sons and daughters meet them.

### **Academics**

Athletes are required to maintain a 2.0 grade point average with no F's in any classes. Participation in sports requires a great deal of time, and athletes must set priorities to ensure that academics get adequate attention. Coaches and teachers are available to help athletes with academic difficulties, but athletes must seek help early to avoid ineligibility.

### **Commitment**

Game schedules are set by a league committee along with the Athletic Director. Practice schedules are set by the coaches with Athletic Director approval to accommodate coaches and the majority of players. Athletes will be expected to adjust their personal schedules in order to attend all games and practices. Coaches need to be notified in advance of absences that cannot be avoided. Missed practices and games hurt the team effort and could result in benching, suspension from games, or removal from the team.

Athletes will be expected to work toward individual and team excellence with persistent physical effort, good sportsmanship, and a cooperative attitude.

### **Behavior**

Loyalton High athletes represent our school and are in position of leadership. They are expected to follow all school, district, league, and CIF rules; to have excellent attendance and to maintain good grades.

**Athletes whose school behavior results in referrals to the office will be warned on the first referral, suspended from a game at the second referral, and dropped from the team for the remainder of the season if a third referral is made. Final decision will be at the discretion of the athletic director and principal.**

Athletes possessing or using alcohol, marijuana, or other illegal drugs, no matter how substances are obtained or who furnishes the illegal substances, will be dropped from athletics for the remainder of the school year. Athletes possessing or using tobacco products will be suspended from one game on the first offense and

dropped from all athletics for the remainder of the school year on the second offense. Student guilt will be determined by the principal based on physical evidence or behavior observed by coaches, school staff, or law enforcement.

Loyalton High athletes who are under the supervision of adults from other schools must comply not only with Loyalton High School Student Handbook rules and regulations but also host family and host school requirements, rules and regulations. Athletes must stay with adult leasers unless permission is granted to leave the school or host home. Any athlete leaving the supervising school or host home without permission will be dropped from the team.

Athletes who are truant or have unexcused absences will not be allowed to practice or to play in games the day of the absence. All exceptions must be cleared in advance of absence with the principal.

Coaches may limit playing time or recommend to the Principal that a player be dropped from the team for repeated displays of poor sportsmanship, vulgarity, or lack of cooperation.

Athletes will be expected to dress for athletic trips and events according to or above school dress regulations as directed by the coaches.

***Any athlete quitting a sport mid-season for unexcused reasons or purposes will have a 9 week sit-out period during his/her next season of sport. The penalty starts from the first day of regularly scheduled practices of the next desired sport and does carry over from year to year. In other words, a track, golf, baseball or softball player who quits must miss the first 9 weeks of the following year's desired sport. For example, if a baseball player quits baseball and doesn't routinely play football but does play basketball, he would sit out the first 9 weeks of basketball the following year. Commitment and dependability are necessities in athletics and will be expected of all athletes.***

***Athletes who are injured during a season of play are expected to remain a part of the team by continuing to attend practices/games and by assisting the coach in any way physically possible. Failure to do so, without an excuse accepted by the coach, will be considered quitting the team.***

### **Uniforms and Equipment**

All athletes with the exception of cheerleaders will be provided with the basic equipment and uniforms to participate in their chosen sport. They are responsible for maintaining uniforms and equipment and returning them in good condition to the coaches at the end of the season. Athletes will need to provide undergarments and footwear. Athletes may also be asked to buy some optional apparel such as kneepads for volleyball and baseball caps. Students will own and keep such items.

### **Locker Room**

All student-athletes are responsible for their uniforms, clothing and personal items in the locker room. It is necessary that all items are either stored in a locker or taken home each day after practice leaving the locker room clutter free for the use of the P.E. classes the following day. All items left out may be discarded and no longer available to the owner.

**Transportation**

Participation in interscholastic sports at Loyaltan High School requires a great deal of travel to away games. Transportation will be by bus for some contests. Parents are needed to volunteer to help transport the teams to away games. In order to drive children that do not belong to the volunteer, the driver must first submit a DMV record and insurance forms with sufficient coverage to the district office.

**FITNESS TO PARTICIPATE IN ATHLETICS**

All high school sports present athletes with a very real risk of injury. Parents are responsible for all medical costs that may occur from injury. Students will be required to show that they have health insurance to address the potentially expensive cost of a sport injury. An inexpensive policy that covers only sports that covers only sports injuries is available through the school office.

Athletes are required to present to the coach or the school office an official physical form with a doctor’s statement as to the fitness of the athlete to participate in school sports before they begin practices. Athletes kept from practice or games due to serious illness or injury will be expected to present to the coach a doctor’s note clearing them to play before they resume full participation.

CIF requires that all high school athletes be under age 19 as of August 31<sup>st</sup>, be undergraduates in high school having completed no more than 8 semesters and be amateur. They further require that athletes have not competed on an outside team in the same sport during the school season of that sport and have not been expelled from any high school during the past year.

Loyaltan High School requires all participating athletes to have cleared all fines, detentions, and unpaid school bills before starting practices.

Loyaltan High School believes that student participation in school sports should be a positive and enriching experience. A great deal of effort and considerable resources have been committed to provide facilities, uniforms, equipment, organization, and leadership for our sport program. We urge parents to be involved and hope all of our athletes will have safe, exciting and fulfilling seasons this year. Please direct questions or concerns to our coaches, our Athletic Director or our Principal.

**I have read the list of expectations for athletes participating in Interscholastic**

**Sports at Loyaltan High School and give \_\_\_\_\_**

**to play \_\_\_\_\_**

names of intended sports for the school year

**for the current season.**

\_\_\_\_\_  
Player Signature

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

\_\_\_\_\_  
Date

# CIF – LOYALTON HIGH SCHOOL

## Code of Conduct for Interscholastic Student-Athletes

*Interscholastic athletic competition should demonstrate high standards of ethics and sportsmanship and promote the development of good character and other important life skills. The highest potential of sports is achieved when participants are committed to pursuing victory with honor according to the six core principles: trustworthiness, respect, responsibility, fairness, caring and good citizenship.(the "Six Pillars of Character"). This Code applies to all student-athletes involved in interscholastic sports in California. I understand that, in order to participate in high school athletics, I must act in accord with the following:*

### TRUSTWORTHINESS

1. *Trustworthiness* – to be worthy of trust in all I do.
2. *Integrity* – live up to high ideals of ethics and sportsmanship and always pursue victory with honor; do what's right even when it's unpopular or personally costly.
3. *Reliability* – fulfill commitments; do what I say I will do; be on time to practices and games.
4. *Loyalty* - be loyal to my school and team; put the team above personal glory.

### RESPECT

5. *Respect* - treat all people with respect all the time and require the same of other student-athletes.
6. *Class* – live and play with class; be a good sport; be gracious in victory and accept defeat with dignity; give fallen opponents help, compliment extraordinary performance, show sincere respect in pre- and post-game rituals.
7. *Disrespectful Conduct* – don't engage in disrespectful conduct of any sort including profanity, obscene gestures, offensive remarks of a sexual or racial nature, trash-talking, taunting, boastful celebrations or other actions that demean individuals or the sport.
8. *Respect Officials* – treat contest officials with respect; don't complain about or argue with official calls or decisions during or after an athletic event.
9. *Importance of Education* – be a student first and commit to getting the best education I can. Be honest with myself about the likelihood of getting an athletic scholarship or playing on a professional level and remember that many universities will not recruit student-athletes that do not have a serious commitment to their education, the ability to succeed academically or the character to represent their institution honorably.
10. *Role-Modeling* - Remember, participation in sports is a privilege, not a right and that I am expected to represent my school, coach and teammates with honor, on and off the field. Consistently exhibit good character and conduct yourself as a positive role model.  
*Suspension or termination of the participation privilege is within the sole discretion of the school administration.*

11. *Self-Control* – exercise self-control; don't fight or show excessive displays of anger or frustration; have the strength to overcome the temptation to retaliate.
12. *Healthy Lifestyle* – safeguard your health; don't use any illegal or unhealthy substances including alcohol, tobacco and drugs or engage in any unhealthy techniques to gain, lose or maintain weight.
13. *Integrity of the Game* – protect the integrity of the game; don't gamble. Play the game according to the rules.

#### **FAIRNESS**

14. *Be Fair* – live up to high standards of fair play; be open-minded; always be willing to listen and learn.

#### **CARING**

15. *Concern for Others* – demonstrate concern for others; never intentionally injure any player or engage in reckless behavior that might cause injury to others or myself.
16. *Teammates* - help promote the well-being of teammates by positive counseling and encouragement or by reporting any unhealthy or dangerous conduct to coaches.

#### **CITIZENSHIP**

17. *Play by the Rules* – maintain a thorough knowledge of and abide by all applicable game and competition rules.
18. *Spirit of Rules* – honor the spirit and the letter of rules; avoid temptations to gain competitive advantage through improper gamesmanship techniques that violate the highest traditions of sportsmanship.

**I have read and understand the requirements of this Code of Conduct. I understand that I'm expected to perform according to this code and I understand that there may be sanctions or penalties if I don't.**

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Student-Athlete Signature

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Date



STUDENT TRAVEL CONTRACT

I agree to the following while traveling as a student of Loyalton High School:

1. I will not have in my possession or use alcohol, tobacco, or drugs during any time on the trip.
2. I will respect the vehicle in which I am riding – bus, car, van, or public transportation.
3. I will respect the housing provided on the trip – motel, hotel, home, or campground.
4. On overnight trips, I agree to stay in my assigned room and not disturb others.
5. I agree to abide by the school dress code on all school trips.
6. I agree not to leave the school group at any time without permission of the teacher or coach in charge.
7. On overnight trips, I agree to stay in my assigned room when the evening curfew begins and not visit other rooms or leave the room.
8. I agree to follow all school rules while attending a school trip.
9. If I cancel after agreeing to attend a tournament, contest, or conference, I will pay my portion of any fees. I understand this may include costs for registration, rooms, and activities that the school has paid for that cannot be refunded.

I understand that if I do not follow the above, there could be consequences including:

1. Disqualification from future school trips.
2. L.H.S. discipline referral.
3. A call to law authorities.
4. A call to your parents requiring they pick you up.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

# ATHLETIC TRANSPORTATION PERMISSION FORM

I give permission for my student athlete to travel to all "AWAY" games during his/her athletic season of play. I understand that this transportation may take place on a bus, in school vehicles or in district approved personal vehicles driven by district approved people.

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Athlete's Name

---

Parent/Guardian Name

---

date

# SPORT GUIDELINES REGARDING ATTENDANCE, ABSENCES, DETENTIONS AND ELLIGIBILITY

6

## ATTENDANCE:

Athletes who miss any part of a day for illness or who miss any part of a day without notifying the office at least the day before the absence of an appointment, MAY NOT participate in practice or games that day.

## ABSENCES THE DAY OF SPORTS' PRACTICES AND GAMES:

Athletes who have doctor, dental, or DMV appointments must get activity permits the day before missing school and return with verification from the medical/DMV office if they wish to attend sports practice or play in an athletic event later that day. Athletes who miss any part of a day for any other reason MAY NOT practice or compete that day. Some coaches will not allow athletes to compete if they miss practice the day before competition.

## ABSENCES THE DAY AFTER A LATE NIGHT GAME:

All athletes are expected to attend school the morning after a late night game. Unexcused tardies and absences will result in forfeiting the right to play in the next game.

## DETENTIONS:

All detentions MUST be served before attending practice or a game.

## ELIGIBILITY:

In order to participate in athletics and other school activities, Grade 9-12 students must have earned at least a 2.0 grade point average and not failed any courses. CIF eligibility is determined at Quarter 1, Semester 1, Quarter 3 and Semester 2. Also, because athletic participation is a privilege and not a right, athletes are held to a higher standard of behavior and attendance than non-participating students. In addition to CIF eligibility, the staff has decided to institute a weekly grade check for athletes and students participating in other extra and co-curricular activities. Every Tuesday grades will be checked, and students with an "F" in any subject WILL NOT be able to participate in games or field trips for the remainder of the week if they will be missing the class with the failing grade. Also, if tutoring is assigned by a teacher, athletes with an "F" will not be allowed to practice unless they have attended lunch and/or after school tutoring from 3:10-4:00 for the duration of the teacher's request. Teachers may waive this restriction if other circumstances need to be taken into consideration. The following Tuesday, grades will be checked once again. If an athlete decides to skip tutoring, he/she forfeits the right to play in the next game. If an athlete skips more than one tutoring during a season, he/she is removed from the team. It is our hope that this new policy will promote ongoing academic success.

I understand and agree to abide by the guidelines stated above.

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

\_\_\_\_\_  
date

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

\_\_\_\_\_  
date

# L.H.S. Athletic Pledge

Loyalton High School is committed to providing a safe, respectful and positive educational experience for all students. Behaviors that are potentially demeaning, abusive, illegal or harmful to students are strictly prohibited at all times, both on and off school grounds and will not be tolerated.

## BULLYING, CYBERBULLYING & HARRASSMENT

Includes any physical act, gesture or use of verbal, written or electronically communicated expression with the reasonable intention to cause any of the following:

- physical or emotional harm to another student*
- damage to another student's property*
- intimidate or threaten the safety of another student*
- interfere with a student's education or the operation of the school*

## HAZING

Hazing is any activity involving someone joining or participating in a group that humiliates, degrades, abuses or risks personal harm regardless of the individual's willingness to participate. Hazing activities and behaviors include, but are not limited to:

- humiliating acts*
- forced social isolation*
- physical brutality such as whipping, beating, striking, branding, shocking or placing a harmful substance on or in the body*
- verbal or emotional abuse*
- *sexual abuse or misconduct*
- sleep deprivation, exposure to the elements, confinement in a small space, or any other activity that may adversely affect the mental or physical health of the victim*
- forced or excessive consumption of food, liquids, alcoholic beverages, drugs or any other substance*
- any activity that includes, causes, or requires a student to perform a duty or task that is illegal.*

Hazing is abuse of power & unacceptable in any form or degree. Even seemingly harmless "traditions" or pranks can potentially go wrong, and often escalate to riskier behaviors or activities.

# BULLYING, CYBERBULLYING, HARASSMENT, & HAZING ARE STRICTLY PROHIBITED

Bullying, cyberbullying, harassment, & hazing are disruptive to learning & extremely dangerous, often resulting in devastating & unintended consequences for perpetrators, victims, families, school, & the entire community. Any activities or behaviors or behaviors associated with bullying, cyberbullying, harassment, or hazing are strictly prohibited in any form.

## DISCIPLINARY MEASURES

Violations of the school's and athletic department's code of conduct, anti-bullying, anti-hazing policy and/or this pledge will be disciplined according to the discretion of the Principal and Athletic Director.

## MY PLEDGE

I, \_\_\_\_\_ pledge to take a stand against bullying, cyberbullying, harassment, & hazing. I recognize that myself & my fellow students are entitled to an education in a safe & respectful environment & that any action or behavior that threatens our safety and well-being is unacceptable & strictly prohibited.

If I am a victim of bullying, cyberbullying, harassment, or hazing or if I witness or become aware of any of the same, I will notify a parent, teacher, coach, or school staff member as soon as possible.

I understand that every allegation of bullying, cyberbullying, harassment or hazing will be taken seriously & thoroughly investigated. I am also aware that knowingly making false allegations is a serious offense & a violation of this pledge.

I have read this pledge & agree to follow the standards set forth.

\_\_\_\_\_  
name of student

\_\_\_\_\_  
date

\_\_\_\_\_  
name of parent/guardian

\_\_\_\_\_  
date

# Student-Athlete Social Media Agreement

Social media can be a useful tool to communicate with teammates, fans, friends, coaches and more. Social media can also be dangerous if you are not careful. Every picture, link, quote tweet, status, or post that you or your friends put online is forever part of your digital footprint. You never know when that will come back to hurt or help your reputation during the recruiting process, a new job, or other important areas of your life.

Recognizing the above:

*I take responsibility for my online profile, including my posts and any photos, videos or other recordings posted by others in which I appear.*

*I will not degrade my opponents before, during, or after games.*

*I will post only positive things about my teammates, coaches, opponents and officials.*

*I will use social media to purposefully promote abilities, team, community and social values.*

*I will consider "Is this the me I want you to see?" before I post anything online.*

*I will ignore any negative comments about me and will not retaliate.*

*If I see a teammate post something potentially negative online, I will have a conversation with that teammate. If I do not feel comfortable doing so, I will talk to the team captain, or a coach.*

*I am aware that I represent my sport(s), school, team, family and community at all times, and will do so in a positive manner.*

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Student-Athlete Signature

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Date

**Pursuing Victory with Honor**  
**Code of Conduct for Parents/Guardians**

Athletic competition of interscholastic age children should be fun and should also be a significant part of a sound educational program. Everyone involved in sports programs has a duty to assure that their programs impart important life skills and promote the development of good character. Essential elements of character building are embodied in the concept of sportsmanship and six core ethical values: trustworthiness, respect, responsibility, fairness, caring, and good citizenship (the "Six Pillars of Character"). The highest potential of sports is achieved when all involved consciously Teach, Enforce, Advocate and Model (T.E.A.M.) these values and are committed to the ideal of pursuing victory with honor. Parents/guardians of student-athletes can and should play an important role and their good-faith efforts to honor the words and spirit of this Code can dramatically improve the quality of a child's sports experience.

**TRUSTWORTHINESS**

*Trustworthiness* – Be worthy of trust in all you do.

*Integrity* - Live up to high ideals of ethics and sportsmanship and encourage players to pursue victory with honor. So what's right even when it's unpopular or personally costly.

*Honesty* – Live honorable. Don't lie, cheat, steal or engage in any other dishonest conduct.

*Reliability* – Fulfill commitments. Do what you say you will do.

*Loyalty* – Be loyal to the school and team; Put the interests of the team above your child's personal glory.

**RESPECT**

*Respect* – Treat all people with respect at all times and require the same of your student-athletes.

*Class* – Teach your child to live and play with class and be a good sport. He/she should be gracious in victory and accept defeat with dignity, compliment extraordinary performance, and show sincere respect in pre- and post-game rituals.

*Disrespectful Conduct* – Don't engage in disrespectful conduct of any sort including profanity, obscene gestures, offensive remarks of a sexual nature, trash-talking taunting, boastful celebrations, or other actions that demean individual or the sport.

*Respect for Officials* – Treat game officials with respect. Don't complain or argue about calls or decisions during or after an athletic event.

**RESPONSIBILITY**

*Importance of Education* – Support the concept of "being a student first." Commit your child to earning a diploma and getting the best possible education. Be honest with our child about the likelihood of getting an athletic scholarship or playing on a professional level. Reinforce the notion that many universities will not recruit student-athletes who do not have a serious commitment to their education. Be the lead contact for college and university coaches in the recruiting process.

*Role Modeling* – Remember, participation in sports is a privilege, not a right. Parents/guardians too should represent the school, coach and teammates with honor, on and off the court/field. Consistently exhibit good character and conduct yourself as a positive role

model.

*Self Control* – Exercise self-control. Don't fight or show excessive displays of anger or frustration.

*Healthy Lifestyle* – Promote to your child the avoidance of all illegal or unhealthy substances including alcohol, tobacco, drugs and some over-the-counter nutritional supplements, as well as of unhealthy techniques to gain, lose or maintain weight.

*Integrity of the Game* – Protect the integrity of the game. Don't gamble or associate with gamblers.

*Sexual Conduct* - Sexual or romantic contact of any sort between student and adults involved with interscholastic athletics is improper and strictly forbidden. Report misconduct to the proper authorities.

**FAIRNESS**

*Fairness and Openness* – Live up to high standards of fair play. Be open-minded, always willing to listen and learn.

**CARING**

*Caring Environment* – Consistently demonstrate concern for student-athletes as individuals and encourage them to look out for one another and think and act as a team.

**CITIZENSHIP**

*Spirit of the Rules* – Honor the spirit and the letter of rules. Teach your children to avoid temptations to gain competitive advantage through improper gamesmanship techniques that violate the highest traditions of sportsmanship.

***I have read and understand the requirements of this Code of Conduct and acknowledge that I may be disciplined if I violate any of its provisions.***

- 1. Verbal reprimand***
- 2. Letter reprimand***
- 3. Suspension from games***

***Severe misconduct will result in an immediate ban from athletic events.***

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

\_\_\_\_\_  
Date

# LOYALTON HIGH SCHOOL

## Contract for Parents of Athletes

The following expectations of the Loyaltan High School Athletic Department and school administration exist as the basis for proper conduct and support of our athletic program.

- Playing time is earned through performance and is not guaranteed to any student-athlete at Loyaltan High School. Only student-athletes should request a meeting with their respective coaches regarding playing time if it is an issue. Coaches will provide honest feedback to the athlete and identify performance areas that can be improved in order to gain additional playing time and experience.
- The following items will not be discussed with a parent:
  1. Playing time
  2. Other athletes in the program
  3. Coaches and their strategies or techniques
- A 24-hour "cool-down" period immediately after each contest will be in place during which there will be no contact or discussions with the coach.
- Parents must follow the proper chain of command pertaining to any issues, concerns or questions. This process begins first with the coach, followed by the athletic director.
- All spectators are required to demonstrate appropriate behavior at all athletic events. Admission to an athletic event entitles the spectator to enjoy a competitive contest in an educational setting. With this in mind, please give all student-athletes, coaches, and officials positive encouragement and support. Booing, taunting or intimidating the officials, coaches, athletes or spectators is unacceptable and will result in the offender being asked to leave that event and possibly be prohibited from attending other athletic events within the school year.
- Parents who offer coaching advice to their child on the sidelines or at home interferes with the goals and success of the team. An athlete needs to focus and listen to only one source of instruction and motivation, and this has to be the coach. Parents should encourage their child, but please allow the coach to perform his/her job.

As a parent, I want my son/daughter to have a positive experience participating on an athletic team at Loyaltan High School, and I am committed to contributing to this outcome.

I have read and understand the parent expectations. If you have any questions regarding this contract, please feel free to contact the athletic director or principal by calling 530-993-4454.

---

Father's Name - print

---

Date

---

Father's Signature

---

Mother's Name - print

---

Date

---

Mother's Signature



# Keep Their Heart in the Game

## A Sudden Cardiac Arrest Information Sheet for Athletes and Parents/Guardians

### What is Sudden Cardiac Arrest?

Sudden Cardiac Arrest (SCA) is when the heart stops beating, suddenly and unexpectedly. When this happens blood stops flowing to the brain and other vital organs. SCA is NOT a heart attack. A heart attack is caused by a blockage that stops the flow of blood to the heart. SCA is a malfunction in the heart's electrical system, causing the victim to collapse. The malfunction is caused by a congenital or genetic defect in the heart's structure.

#### How common is sudden cardiac arrest in the United States?

As the leading cause of death in the U.S, there are more than 300,000 cardiac arrests outside hospitals each year, with nine out of 10 resulting in death. Thousands of sudden cardiac arrests occur among youth, as it is the #2 cause of death under 5 and the #1 killer of student athletes during exercise.

#### Who is at risk for sudden cardiac arrest?

SCA is more likely to occur during exercise or physical activity, so student-athletes are at greater risk. While a heart condition may have no warning signs, studies show that many young people do have symptoms but neglect to tell an adult. This may be because they are embarrassed, they do not want to jeopardize their playing time, they mistakenly think they're out of shape and need to train harder, or they simply ignore the symptoms, assuming they will "just go away." Additionally, some health history factors increase the risk of SCA.

#### What should you do if your student-athlete is experiencing any of these symptoms?

We need to let student-athletes know that if they experience any SCA-related symptoms it is crucial to alert an adult and get follow-up care as soon as possible with a primary care physician. If the athlete has any of the SCA risk factors, these should also be discussed with a doctor to determine if further testing is needed. Wait for your doctor's feedback before returning to play, and alert your coach, trainer and school nurse about any diagnosed conditions.

### What is an AED?

**An automated external defibrillator (AED) is the only way to save a sudden cardiac arrest victim. An AED is a potable, user-friendly device that automatically diagnoses potentially life-threatening heart rhythms and delivers an electric shock to restore normal rhythm. Anyone can use an AED regardless of training. Simple audio direction instructs the rescuer when to press a button to deliver the shock while other AEDs provide an automatic shock if the fatal heart rhythm is detected. A rescuer cannot accidentally hurt a victim with an AED – quick action can only help. AEDs are designed to only shock victims whose hearts need to be restored to a healthy rhythm. Check with your school for locations of on-campus AEDs.**

*Fainting is the #1 symptom of a heart condition*

## The Cardiac Chain of Survival

On average it takes EMS teams up to 12 minutes to arrive to a cardiac emergency. Every minute delay in attending to a sudden cardiac arrest victim decreases the chance of survival by 10%. Everyone should be prepared to take action in the first minutes of collapse.

**Early Recognition of Sudden Cardiac Arrest**  
*Collapsed and unresponsive – gasping, gurgling, snorting, moaning or labored breathing noises – seizure-like activity*

#### Early access to 9-1-1

*Confirm unresponsiveness*

*Call 9-1-1 and follow emergency dispatcher's instructions.*

*Call any on-site Emergency Responders*

#### Early CPR

*Begin cardiopulmonary resuscitation (CPR) immediately. Hands-only CPR involves fast and continued two-inch chest compressions-about 100 per minute.*

#### Early Defibrillation

*Immediately retrieve and use an automated external defibrillator (AED) as soon as possible to restore the heart to its normal rhythm. Mobile AED units have step-by-step instructions for a bystander to use in an emergency situation.*

#### Early Advanced Care

*Emergency Medical Services (EMS) responders begin advanced life support including additional resuscitative measures and transfer to a hospital.*

# Keep Their Heart in the Game

## Recognize the Warning Signs & Risk Factors of Sudden Cardiac Arrest (SCA)

*Tell your Coach and Consult your doctor if these conditions are present in your student-athlete*

### Potential Indicators that SCA May Occur

- Fainting or seizure, especially during or right after practice
- Fainting repeatedly or with excitement or startle
- Excessive shortness of breath during exercise
- Racing or fluttering heart palpitations or irregular heartbeat
- Repeated dizziness or lightheadedness
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise

### Factors that Increase the Risk of SCA

- Family history of known heart abnormalities or sudden death before age 50
- Specific family history of Long QT Syndrome, Brugada Syndrome, Hypertrophic Cardiomyopathy, or Arrhythmogenic Right Ventricular Dysplasia (ARVD)
- Family Members with unexplained fainting, seizures, drowning or near drowning or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs, such as cocaine, inhalants, "recreational" drugs, excessive energy drinks or performance-enhancing supplements

### What is CIF doing to help protect student-athletes?

CIF amended its bylaws to include language that adds SCA training to coach certification and practice and game protocol that empowers coaches to remove from a play a student-athlete who exhibits fainting – the number one warning sign of a potential heart condition. A student-athlete who has been removed from play after displaying signs or symptoms associated with SCA may not return to play until he or she is evaluated and cleared by a licensed health care provider. Parents, guardians and caregivers are urged to dialogue with student-athletes about their heart health and everyone associated with high school sports should be familiar with the cardiac chain of survival so they are prepared in the event of a cardiac emergency.

I have reviewed and understand the symptoms and warning signs of SCA and the new CIF protocol to incorporate SCA prevention strategies into my student's sports program.

Student-Athlete Signature

Print Student-Athlete's Name

Date

Parent/Guardian Signature

Print Parent/Guardian's Name

Date

## Concussion Information Sheet

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 incoordination; 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 TOO SOON TO ACTIVITY

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 CIF Bylaw 313 now requires implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

“A student-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 for the remainder of the day.”

And

“A student-athlete who has been removed may not return to play until the athlete is evaluated by a licensed health care provider trained in the education and management of concussion and receives 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 is better to miss one game than to 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/>

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Signature of Student

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Date

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Signature of Parent

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Date

Adapted from the CDC and the 3<sup>rd</sup> International Conference on Concussion in Sport  
Document created 5/20/2010

SERIOUS CATASTROPHIC AND PERHAPS FATAL INJURY MAY  
RESULT FROM ATHLETIC PARTICIPATION

By its very nature, competitive athletics may put students in situations in which serious, catastrophic and, perhaps, fatal accidents may occur.

Many forms of athletic competition result in violent physical contact among players. Even the use of equipment may result in accidents, strenuous physical exertion, and numerous other exposures to risk of injury.

Students and parents must assess the risks involved in such participation and make their choice to participate in spite of those risks. No amount of instruction, precaution, or supervision will totally eliminate all risk of injury. Just as driving an automobile involves choice of risk, athletic participation by high school students also may be inherently dangerous. The obligation of parents and students making this choice to participate cannot be overstated. There have been accidents resulting in death, paraplegia, quadriplegia, and other very serious permanent physical impairment as a result of athletic competition.

By granting permission for your student to participate in athletic competition, you, the parent, or guardian acknowledges that such risks exist.

By choosing to participate, you, the student acknowledges that such risks exist.

Students will be instructed in proper techniques to be used in athletic competition and in the proper utilization of all equipment worn or used in practice and competition. Students **must** adhere to that instruction and utilization and **must** refrain from improper uses and techniques.

As previously stated, no amount of instruction, precaution, and supervision will totally eliminate all risk of serious, catastrophic, or even fatal injury.

If any of the foregoing is not completely understood, please contact the principal at your school for further information.

PLEASE COMPLETE AND SIGN IN THE SPACES PROVIDED.

STUDENT'S NAME \_\_\_\_\_ SPORTS \_\_\_\_\_

*A SPECIAL WARNING TO FOOTBALL PLAYERS:*

*DO NOT USE HELMET TO BUTT, RAM OR SPEAR AN OPPOSING PLAYER. THIS IS IN VIOLATION OF THE FOOTBALL RULES AND SUCH USE CAN RESULT IN SEVERE HEAD OR NECK INJURIES, PARALYSIS OR DEATH TO YOUR OPPONENT. NO HELMET CAN PREVENT ALL HEAD OR NECK INJURIES A PLAYER MIGHT RECEIVE WHILE PARTICIPATING IN FOOTBALL.*

The signature below will acknowledge that we have read and understand the material contained in this warning to students and parents or guardians.

I hereby give my consent for the above-named student to compete in sports. I authorize the student to go with and be supervised by a representative of the school on any trips. In case this student become ill or is injured, you are authorized to have the student treated and I authorize the medical agency to render treatment.

SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF STUDENT : \_\_\_\_\_ DATE: \_\_\_\_\_

# ATHLETIC FUNDRAISING

*Because the L.H.S. athletic programs are funded by our Booster Club, it is important for the teams to do fundraising each season. Each athlete is responsible to do his/her part to raise money that will help provide necessary items for the team. For any athlete who chooses not to participate in the team fundraiser, a flat fee of \$25 will be accepted. It is the athlete's responsibility to communicate his/her decision to the appropriate coach. If the team chooses to order personal t-shirts, hoodies, or other items, additional money may be required to cover the costs. Information will be provided before orders are placed.*

I, \_\_\_\_\_ agree to support my  
Athlete's Name  
team by participating in the fundraising opportunities  
that my coach provides. If I choose not to participate, I agree to  
pay \$25 in order to help cover team expenses.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

**PLUMAS UNIFIED SCHOOL DISTRICT - MEDICAL/PARENTAL CONSENT FOR ATHLETIC PARTICIPATION**

Student Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 School: \_\_\_\_\_ Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
 Sex: \_\_\_\_\_  
 Sport/s: \_\_\_\_\_

**Family History (Parents)**

	Yes	No
High Blood Pressure	<input type="checkbox"/>	<input type="checkbox"/>
Strokes	<input type="checkbox"/>	<input type="checkbox"/>
Heart Trouble	<input type="checkbox"/>	<input type="checkbox"/>
Blackout Spells	<input type="checkbox"/>	<input type="checkbox"/>
Seizures or Fits	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
Kidney Disease	<input type="checkbox"/>	<input type="checkbox"/>
Sudden Deaths	<input type="checkbox"/>	<input type="checkbox"/>
Blindness	<input type="checkbox"/>	<input type="checkbox"/>
Bleeding Disorders	<input type="checkbox"/>	<input type="checkbox"/>

Explain all yes answers:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Medical History (Student)**

Have you ever had the following illnesses?

	Yes	Date	No
TB	<input type="checkbox"/>	_____	<input type="checkbox"/>
Mononucleosis	<input type="checkbox"/>	_____	<input type="checkbox"/>
Rheumatic Fever	<input type="checkbox"/>	_____	<input type="checkbox"/>
Measles	<input type="checkbox"/>	_____	<input type="checkbox"/>
Chicken Pox	<input type="checkbox"/>	_____	<input type="checkbox"/>
Mumps	<input type="checkbox"/>	_____	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	_____	<input type="checkbox"/>

**Medical History (Student continued)**

Allergies: None \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Medications: None \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Hospitalizations: None \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Operations: None \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Immunizations: Date

DPT	_____
Mumps	_____
Measles	_____
Polio	_____
Rubella	_____

**Health History (Student)**

Have you recently had or do you now have:

	Yes	No
Frequent headaches	<input type="checkbox"/>	<input type="checkbox"/>
Concussion	<input type="checkbox"/>	<input type="checkbox"/>
Seizures or Fits	<input type="checkbox"/>	<input type="checkbox"/>
Blackouts	<input type="checkbox"/>	<input type="checkbox"/>
Heat Stroke	<input type="checkbox"/>	<input type="checkbox"/>
Double Vision	<input type="checkbox"/>	<input type="checkbox"/>
Eyeglasses or Contact Lens	<input type="checkbox"/>	<input type="checkbox"/>
Blindness of Either Eye	<input type="checkbox"/>	<input type="checkbox"/>
Dental Appliances (braces, false teeth)	<input type="checkbox"/>	<input type="checkbox"/>
Dizzy Spells	<input type="checkbox"/>	<input type="checkbox"/>
Poor Hearing	<input type="checkbox"/>	<input type="checkbox"/>
Frequent Earaches	<input type="checkbox"/>	<input type="checkbox"/>
Nosebleeds	<input type="checkbox"/>	<input type="checkbox"/>
Rapid Heart Beat at Rest	<input type="checkbox"/>	<input type="checkbox"/>
irregular Heart Beat	<input type="checkbox"/>	<input type="checkbox"/>
High Blood Pressure	<input type="checkbox"/>	<input type="checkbox"/>
Heart Murmur	<input type="checkbox"/>	<input type="checkbox"/>
Heart Trouble	<input type="checkbox"/>	<input type="checkbox"/>
Swollen Ankles (other than sprains)	<input type="checkbox"/>	<input type="checkbox"/>
Shortness of Breath	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>
Pneumonia	<input type="checkbox"/>	<input type="checkbox"/>
Other Lung conditions	<input type="checkbox"/>	<input type="checkbox"/>
Chest Pain	<input type="checkbox"/>	<input type="checkbox"/>
Constant Coughing	<input type="checkbox"/>	<input type="checkbox"/>
Ulcers	<input type="checkbox"/>	<input type="checkbox"/>
Worms	<input type="checkbox"/>	<input type="checkbox"/>
Yellow Jaundice	<input type="checkbox"/>	<input type="checkbox"/>
Unexplained Fevers	<input type="checkbox"/>	<input type="checkbox"/>
Kidney Problems	<input type="checkbox"/>	<input type="checkbox"/>
Bladder Infections	<input type="checkbox"/>	<input type="checkbox"/>
Blood in Urine	<input type="checkbox"/>	<input type="checkbox"/>
Blood Transfusion	<input type="checkbox"/>	<input type="checkbox"/>
Anemia (low blood)	<input type="checkbox"/>	<input type="checkbox"/>
Thyroid Trouble	<input type="checkbox"/>	<input type="checkbox"/>
Free Bleeding	<input type="checkbox"/>	<input type="checkbox"/>
Easy Bruising	<input type="checkbox"/>	<input type="checkbox"/>
Hot or Cold Spells	<input type="checkbox"/>	<input type="checkbox"/>
Arthritis	<input type="checkbox"/>	<input type="checkbox"/>
Knee injury	<input type="checkbox"/>	<input type="checkbox"/>
Knee pain	<input type="checkbox"/>	<input type="checkbox"/>
Dislocations	<input type="checkbox"/>	<input type="checkbox"/>
Fractures	<input type="checkbox"/>	<input type="checkbox"/>
Neck Injury	<input type="checkbox"/>	<input type="checkbox"/>
Weak Ankles	<input type="checkbox"/>	<input type="checkbox"/>
Back Ache	<input type="checkbox"/>	<input type="checkbox"/>

Explain all yes answers:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I certify that the information on the above form is true:

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

Business Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

### Parental Consent for Participation

I hereby give my consent for the above student to engage in approved sports activities. I also give my consent for my student to be transported in connection with participation in athletic activities. It is my clear understanding that participation in athletic activities creates risks normally associated with such activities and that the risk increases as the sport becomes more vigorous and/or involves bodily contact. I further give my permission for appropriate school staff or their designees to render emergency treatment associated with an injury and agree to hold the school district and its employees harmless in the administration of such emergency assistance.

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

#### Physician's Statement (To be completed by examining physician.)

**Absolute Contraindications:**

- |  |  |
|--|--|
| <ol style="list-style-type: none"> <li>1. Three concussions</li> <li>2. Large cranial defect</li> <li>3. History of retinal detachment</li> <li>4. Absence of one eye</li> <li>5. Amblyopia of one eye.20/200</li> <li>6. Congenital glaucoma</li> <li>7. Symptomatic lung infection</li> <li>8. Severe mitral stenosis</li> <li>9. Cyanotic heart disease</li> <li>10. Aortic stenosis</li> </ol> | <ol style="list-style-type: none"> <li>11. Active myocarditis</li> <li>12. Symptomatic pulmonary hypertension</li> <li>13. Blood coagulation defects</li> <li>14. Any enlarged abdominal organ</li> <li>15. Undescended testicle over pubic tubercle</li> <li>16. Chronic osteomyelitis</li> <li>17. Symptomatic spinal epiphysitis</li> <li>18. Painful spondylolisthesis or spondylolysis</li> <li>19. Active kidney problems</li> </ol> |
|--|--|

Height \_\_\_\_\_ Weight \_\_\_\_\_ Resting Pulse \_\_\_\_\_ Blood Pressure \_\_\_\_\_

Visual Acuity: with glasses Both \_\_\_\_\_ R \_\_\_\_\_ L \_\_\_\_\_  
 without glasses Both \_\_\_\_\_ R \_\_\_\_\_ L \_\_\_\_\_

Urine: Protein/Sugar \_\_\_\_\_

Head _____	Lungs _____	Scoliosis _____
Eyes _____	Heart _____	Back _____
Ears _____	Abdominal _____	Upper Extremities _____
Mouth _____	Hernia _____	Lower Extremities _____
Teeth _____	Genitalia _____	Skin _____
Neck _____		

N = normal  
 X = abnormal  
 O = not examined

I certify that \_\_\_\_\_ has been examined by me on \_\_\_\_\_. He/she is physically qualified to participate in contact sports (football, wrestling, basketball, soccer) and non-contact sports, with the following limitations:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Physician's Signature \_\_\_\_\_ Date \_\_\_\_\_

Use this section for additional notations

\_\_\_\_\_