

Pulaski County Special School District

925 East Dixon
Little Rock, Arkansas 72216
501-490-2000

North Pulaski High



Mills University



Jacksonville



Robinson Senators



Sylvan Hills



Oak Grove High



Pulaski County Special School District

Athletic Handbook

Northwood
Middle



Fuller
Middle



Jacksonville
Middle
Boys/Girls



Robinson
Middle



Sylvan Hills
Middle

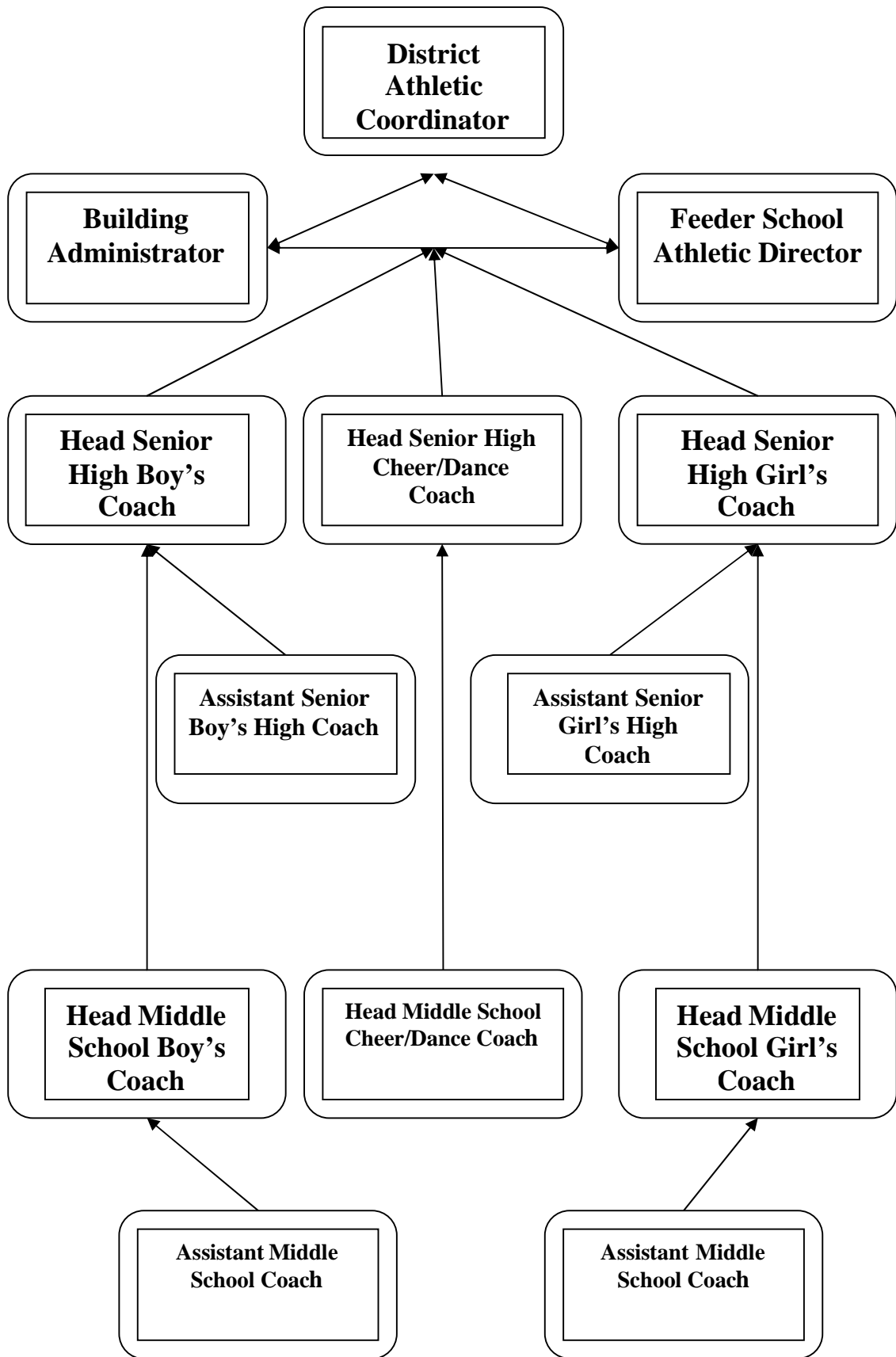


Maumelle
Middle



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Pulaski County Special School District Athletic Handbook 2007-2008

The purpose of the Pulaski County Special District Athletic Handbook is to provide an understanding and appreciation of the athletic program, and to enhance communication among the coaches, athletes and parents. This handbook contains most of the practices, policies and regulations that govern extracurricular athletics in the Pulaski County Special School District. The entire handbook will be reviewed annually by the Athletic Committee, the Administrative staff.

Pulaski County Special School District is committed to maintaining an excellent athletic program, and athletics are a major component of the participating students' experience. The athletic department has a responsibility to the student to provide the opportunity to grow through the pursuit of athletics. It will offer as many sports as the school can reasonably support, and if there is sufficient competition within the Conferences. The Athletic Department will provide proper facilities, equipment, and coaching to see that each student athlete has an opportunity to reach his or her athletic potential. Excellence in sports, rather than mere success, is the goal.

In order for a student to participate in any sport in Pulaski County Special School District, both the student and the parents or guardians must sign the Parental Consent section of the Athletic Physical form. Signing the form indicates an agreement that all the policies, procedures and regulations in this Athletic Handbook are understood and will be followed.

Pulaski County Special School District attempts to provide extracurricular sports opportunities for all students who wish to participate. Students in grades 7 -12 are eligible to participate during each of the three seasons.

Students may participate in the following sports: football, basketball, baseball, tennis, golf, softball, soccer, Track, Volleyball, cheering, drill team, bowling, and swimming.

ATHLETIC SCHEDULES

The athletic department distributes athletic schedules for each athletic season. These schedules are distributed to members of all teams during the first week of the season. Additional schedules may be obtained from the athletic department or the school office.

ATHLETIC DEPARTMENT DIRECTOR

Mills University Studies – **Leo Oberts** **490-5700**
Jacksonville – **Jerry Wilson** **982-2128**
North Pulaski – **Tony Bohannon** **982-9436**
Oak Grove – **John Mayes** **851-5350**
Sylvan Hills – **Denny Tipton** **833-1100**
Robinson – **Todd Eskola** **868-2400**
PCSSD Athletic Coordinator – **Bobby Cole** **490-6321**

ADMISSION PRICES

Sport	Adults	Students
Sr. Football	\$ 5.00	\$ 4.00
Sr. Basketball	\$ 5.00	\$ 4.00
Sr. Volleyball	\$ 5.00	\$ 4.00
Sr. Baseball	\$ 4.00	\$ 3.00
Sr. Softball	\$ 4.00	\$ 3.00
Sr. Soccer	\$ 4.00	\$ 3.00
9 th Football	\$ 4.00	\$ 3.00
9 th Basketball	\$ 4.00	\$ 3.00

Ticket prices for other sports will be deemed appropriate by home management.

CANCELLATION OF GAMES / PRACTICES

If inclement weather causes the cancellation of school in the Pulaski County Special School District the games and other activities affiliated with member schools will also be canceled. Cancellation of games and or practices due to inclement weather will normally be made after 1:00 PM (Contact your schools office). Rescheduled dates, if known, will be available in the office. Student-athletes should always come to school prepared to play or practice that afternoon. Do not assume a cancellation based on the weather in the morning. Decisions about cancellation after 3:00 PM will be made at the game/ practice site.

ATHLETIC DRESS CODE/SCHOOL DRESS

Students are representing Pulaski County Special School District when they are traveling to and from athletic contests and coming back to school for home contests. They are required to dress in accordance with the school dress code for **Away Games** (when it is not appropriate to wear athletic uniforms to the game). The students must be attired in proper athletic dress code before they board the bus going to the game and returning from the game. For home games, the dress code applies before the athletes enter the building (see student handbook).

ATHLETIC UNIFORMS

Athletic uniforms may not be worn to school without approval of the Head Coach and the building administrator. Uniforms must be returned in satisfactory condition no later than one week after the final athletic contest for the season. If possible, coaches should collect all uniforms and equipment at the conclusion of the final game. Parents of athletes will be responsible for uniforms not returned after the one-week period. Any charges for uniforms lost or not returned will be added to the student's account.

JEWELRY

No headgear or other ornamentation shall be worn except as approved by the Coach or Building Administrator for special circumstances. The prohibited items include, but are not limited to: do-rags, caps, bandannas, visors, other head coverings, sunglasses and soft or hard jewelry, body and facial piercing.

ARKANSAS ACTIVITIES ASSOCIATION ELIGIBILITY REQUIREMENTS

Student athletes are subject to the eligibility requirements of the Arkansas Activities Association and Pulaski County Special School District. **(Second Semester Grades 9 through 12)** To be eligible to compete on a team, an athlete must attend the member school and not have reached his or her 19th birthday on or before September 1st. To be academically eligible to participate in athletics, a student must meet the following requirement: At the end of each semester grading period, students must have a **"C" average (2.0)**. Students failing to meet these requirements may be put on a supplemental instruction program (SIP) (see AAA rules). Students promoted to the 7th and 8th grade automatically meet the academic eligibility requirements. **(Second semester Grades 8th, through first semester 9th)** Must pass four academic courses the previous semester, three of which shall be in the core curriculum areas (math, science, English, social studies) to be eligible.

ATHLETIC PRACTICE DATES

Practices and try-outs for the Fall Athletic Season will start around the early or middle part of August (according to AAA rules). The exact dates, times and sites will be available to students and parents in May. Parents and students should note these dates on their summer schedule and be available for practice and/ or try-outs in August.

ATTENDANCE

Every athlete is expected to be at all practices and contest. Any athlete leaving school during the day will be required to check out through the school office. An athlete who is at school but unable to participate will be required to be with that particular activity unless excused by a staff member.

In order to practice or participate in an athletic contest, students must attend a minimum of 1/2 day.

PLAYING FOR OTHER TEAMS / PARTICIPATING IN

CONFLICTING ACTIVITIES (2 school teams in the same season)

Pulaski County Special School District expects athletes to play only for the school team. Student-athletes are required to discuss with the coach **during or before try-outs** participating for another team or activity, in order to come to a mutual decision before the team is selected. The Athletic Coordinator and Building Administrator will make the decision to allow athletes to remain on the team and that decision will be based largely on the coach's recommendation. Participation on more than one team in the same season is allowed with prior approval from the Athletic Director, School Administrator and the coaches involved. If other school events, such as field trips, classes, club, chorus, band or drama activities conflict with games or practices, the School Administrator will resolve the conflict with the benefit of recommendations from the Athletic Director and the sponsoring faculty member. Student and parent wishes will also be considered.

If an athlete quits or is dismissed from a team during the season, he/she may not be able to participate in another sport until the previous sport is completed.

SELECTION OF TEAMS

Prior to the Season, the coaches will hold tryouts in order to select team members, students must meet all academic and enrollment requirements prior to tryouts. Tryouts and "cuts" are probably the most painful experience for coaches, students, and parents/guardians alike. While we would like to accommodate every student who wants

to participate in a sport, limitations in facilities, coaches, and other resources as well as safety factors make tryouts and "cuts" necessary. Each coach is responsible for establishing guidelines for tryouts and "cuts" in his/her sport. All related decisions are at the discretion of the coach, but we strive for our procedures to be well communicated, consistent, and fair. Tryouts for a sport will not take place until the previous sport is complete.

PRE-SEASON COACHES/ PARENTS MEETING

The coaches will conduct a **pre-season meeting** at the beginning of each athletic season. The dates and times of these meetings will be listed in the school calendar as well as notification by the coaches at least two weeks in advance. Parents are encouraged to attend the pre-season meeting. If for some reason, neither parent can attend the scheduled meeting, they may schedule a private meeting with the coach as soon as possible. Coaches will be able to discuss their goals, along with team rules and regulations. Lines of communication with the coach and parents will be established at this time.

BOOSTER CLUB

Each school in the Pulaski County Special School District allows the parents an opportunity to organize or join an athletic booster club. The sole purpose of this parent group is to promote and support the interscholastic athletic programs of the school. The club makes significant financial contributions to the athletic program. Students and their parents are urged to support and to participate in Booster Club activities. It will be the responsibility of the booster club to collect and distribute any money collected from membership drives, fund raisers, or activities. The school or coaches will not have any responsibility to collect memberships money or fundraisers money.

SAFETY

The Athletic Department strives to provide students a safe and enjoyable environment in which to participate. Consequently, all coaches and administrative personnel have a responsibility to reduce and/ or eliminate all potential safety hazards. It is vital to understand that participation in athletics involves inherent risks. Coaches and administrative personnel are obligated to act in a prudent manner in order to prevent foreseeable accidents and injuries. They should respond to unexpected circumstances according to guidelines set forth in this handbook.

INSURANCE and ATHLETIC PHYSICALS

Adequate insurance coverage for an athlete is the **responsibility of the parent or guardian**. Pulaski County Special School District offers an optional Student Accidental Insurance Plan that covers after-school sports accidents and injuries. Payment for the supplemental insurance will go directly to the company, PCSSD is not responsible for payment. The Athletic Physical Form has an insurance disclaimer that must be signed by the parent or guardian before a student participates in athletic try-outs, practices or games. No student may begin any phase of the athletic program (practices, or other activities) without obtaining permission from a physician and completion of the Emergency Information Form. **The physical must be completed for each upcoming school year or activity.** A new athletic physical must be completed each year. The Athletic Physical Form will be filed in the office, and the parent or student at their request may obtain a copy of the physical. Copies of the Insurance Disclaimer and Emergency Medical Form will be issued to the coaches to carry with them to all away games. Blank copies of the Athletic Physical form may be obtained from both the team coach and the school office. Website: www.k12studentinsurance.com

MEDICAL PROCEDURES:

All participants in the athletic program must have completed a physical examination, and been cleared by a physician to participate.

1. A current physical form must be completed before the student can participate.
2. The Pre-Participation History section of the physical form is a required part of the examination, and must be completed as part of the physical examination.
3. Physicals may be provided by the district. Parents have the option to be examined by a private physician at their own expense. The PCSSD Pre-Participation Physical Evaluation must be used, and may be obtained from the school office.
4. Emergency Medical Authorization Form – This form must be completed and signed by the parent/guardian prior to participation, and returned to the coach. The form will be with the coach at all practices and contests. This form will provide the coach with necessary medical emergency information in the event of injury or illness.

5. Accident Report – All injuries requiring medical attention must be reported to the coach or school medical official. An Accident Report must be filed with the school nurse or building administrator within a 24-hour period (or next school day) if the athlete seeks or is administered medical treatment.

6. Medical Reinstatement – When an athlete has had a serious injury or illness and has been restricted because of a physician, A physician's note is required before the athlete will be allowed to return to practices or contests. The note must indicate the date when participation may resume. Reinstatement notes must be processed through the school nurse or building administrator.

PARTICIPATION FEE

A participation fee will be (9-12 \$30), (7-8 \$20) required before a student can participate in an activity. The participation fee does not guarantee game participation. Once a student has practiced with the team, the participation fee and any other individual fees are nonrefundable. PCSSD has a limit of two (2) activity fees per family. The participation fee will help toward the cost of transportation. The head coach will receipt and turn in all money to the building bookkeeper before the end of the day.

PLAYING TIME

Playing time is a privilege and should be earned. Players are expected to attend all scheduled practices. The coach should be notified in advance, if possible, when a student will miss practice(s). Coaches should follow these playing time guidelines:

Middle School-Every player in good standing will have the opportunity to participate. At this level, participation and the development of varsity-level skills are more important than winning contests. Coaches are encouraged to provide "quality playing time" for each athlete but we do not specify a minimum or maximum amount of time each player will be allotted. IT IS THE SOLE RESPONSIBILITY OF THE COACH TO DETERMINE AMOUNTS OF PLAYING TIME, POSITIONS ASSIGNED, AND PLAYER ROLE. Coaches are expected to play all eligible players in each game during the regular season. (Football), 7th grade will only participate for the 7th grade team while the 8th grade will only participate for the 8th grade team. 9th grade may participate for the 9th grade or the Sr. High team, but they may not participate in both. (see AAA rules). (Basketball, Volleyball, Track) – After try-outs students may play up a grade level. Movement of players should take

place before the first ballgame. Once a student plays up they cannot play back down. 8th grade students cannot play 9th grade in any sport.

Exceptions for students to not participate: 1. Missing team practice(s) 2. Attitude and effort at practice(s) 3. Violation of team rules. It will be the responsibility of the coach to relay the exceptions for students' lack of participation to the parent.

Junior Varsity-Coaches are encouraged to play all eligible players in each game during the regular season.

Varsity-Coaches should play as many players as feasible. Playing time on the Varsity level is based on coaching decisions made during practice and the contest.

DISCIPLINE PROCEDURE:

The following discipline procedures have been established to expedite violations of established rules and regulations. These procedures are consistent with those documented in the PCSSD Student Handbook. The procedures include:

1. **Squad Discipline** – Used in situations of minor disciplinary problems, and administered by the coach within the framework of the team. Some examples might be: tardy to practice, refusal to follow directions, horseplay, unsportsmanlike behavior, etc.
2. **Suspension from Team**– Used in situations of serious disciplinary problems. The athlete is not allowed to attend or participate in practices or contests during this period. The coach will notify the parents/guardians of the suspension. Some examples might be: profanity, missed practices, insubordination, etc.
3. **Dismissal from Team** – Used in situations involving serious disciplinary matters in which removal of the athlete from the squad is in the best interest of the team and the school. Parents will be notified of the pending dismissal. Some examples might be, but are not limited to: continuation of previously identified behavior, use of drugs, hazing, etc.

HAZING:

Hazing is a very serious act and will not be permitted or tolerated by any member of an athletic team. Hazing is a complex social problem that is shaped by power dynamics operating in a group and/or organization. Hazing refers to any activity expected of someone joining

a group that humiliates, degrades or risks emotional and/or physical harm, regardless of the victim's willingness to participate.

The following are some examples of hazing:

Deception, silence periods with implied threats for violation, deprivation of privileges granted to other members, requiring new members to perform duties not assigned to other members, socially isolating new members, expecting certain items to always be in one's possession, verbal abuse, threats, asking new members to wear embarrassing or humiliating attire, expecting new members to perform personal service to others, sexual simulations, beating, expecting illegal activity, wedgies, etc.

Hazing perpetrators are subject to appropriate disciplinary action, including but not limited to, suspension or dismissal from the team. Hazing is covered by the PCSSD Policy Against Harassment, Intimidation, or Bullying.

SPORTSMANSHIP

At Pulaski County Special School District, team and individual competition contribute significantly to the development of character and school spirit. Sportsmanship and fair play are important parts of this experience. We expect our coaches, players, faculty and students to represent their school in a manner that is respectful of others on and off the fields of competition. It is our desire and goal that we develop and practice the highest standards of courtesy, discipline, good sportsmanship, and the ability to act as good hosts and guests. We encourage enthusiastic support at all games within the boundaries of accepted good sportsmanship. We expect adult spectators to uphold the same high standards that we demand of our student supporters and players and to set good examples of sportsmanship.

The following guidelines have been established to help foster and promote good sportsmanship at Pulaski County Special School District.

THE ATHLETES SHALL:

1. Be courteous to opposing teams and all game officials.
2. Never give up, cheat, use inappropriate language or "grandstand."
3. Retain composure at all times and never leave the bench or enter the field or court to engage in any confrontation.
4. Be modest when successful and be gracious in defeat. A true sportsman does not offer excuses for failures.
5. Play for the enjoyment of the game.
6. Understand and observe the rules of the game and the standards of eligibility.
7. Set high standards of personal conduct.
8. Respect the integrity and judgment of officials and accept their decisions without question.
9. Respect the facilities of host schools. Remember, we are their guests.

THE SPECTATORS SHALL:

1. Realize that they represent the school just as the players do, and therefore have an obligation to demonstrate through their behavior the practice of good sportsmanship.
2. Recognize that good sportsmanship is more important than victory by approving and applauding good team play, individual skill, and outstanding examples of sportsmanship and fair play exhibited by either team.
3. Recognize that since the primary purpose of interscholastic athletics is to promote the physical, mental, moral, social and emotional well-being of the players through the medium of a contest, victory or defeat is of secondary importance.
4. Treat visiting teams and officials as guests, extending to them every courtesy. Treat them as you would like to be treated.
5. Be modest in victory and gracious in defeat.
6. Respect the judgment and integrity of officials, realizing that their decisions are based upon game conditions as they observe them.

Student-Athletes who fail to display proper behavior and/ or good sportsmanship before, during, and after an athletic contest or practice may be barred from further participation. Penalties such as probation or suspension from one or more games may be imposed depending upon the severity of the transgressions. Students who have been severely reprimanded or dismissed from a team for poor sportsmanlike

conduct or improper behavior by the coach, and / or the Athletic Director and / or the Building Administrator will usually not be eligible for end of the season awards.

Spectators (students or adults) who display poor sportsmanship or improper behavior before, during, and after an athletic contest may be asked to leave the field or gym. Based on the circumstances, they may be barred from attending any games for the remainder of the season.

TRANSPORTATION and OUT OF TOWN LODGING/ MEALS

PULASKI COUNTY SPECIAL SCHOOL DISTRICT REQUIRES MEMBERS OF ATHLETIC TEAMS TO USE SCHOOL PROVIDED TRANSPORTATION TO AND FROM ALL AWAY GAMES AND OFF- CAMPUS PRACTICE AND GAME SITES.

Exceptions may be made in the following circumstances:

This exception must be approved in advance. Requests for exceptions must be made on a school-provided form, which contains a release of liability clause. These forms may be obtained from the Athletic Director and are also located in the office.

- Parents or parent-designated adults may transport team members home after off site practices or games with **prior** knowledge and consent.
- Parents or guardians must notify the coach that the student has a ride home. Other team members may ride home with the adult with prior written permission of their parent or guardian.
- The responsible adult must sign the athlete out before the athlete can leave.

The athlete must take care of uniform responsibilities before departing.

- On the recommendation of team coaches and the Athletic Director, the Principal or his designated representative may allow a student to drive his or her private vehicle to a practice or home game..
- A student may drive other students from the practice or game site to home with the written permission of the parent of the student riders.
- When the practice or game is on a weekend or a day when school is not in session, the building administrator or the designee may approve a team coach's

recommendation to have team members arrange their own transportation to games and/or practices.

The Building administrator may revoke that approval at any time during that season

When team members are required to stay in motels/ hotels overnight, the team members may be responsible for paying the cost of the rooms. Team members may also be responsible for their own meal money. Pulaski County Special School District will provide transportation to all AAA approved in-state tournaments and games and also may pay for the coaches and bus driver's accommodations. Coaches may also receive meal money upon request.

Pulaski County Special School District Physical Evaluation/History Form

HISTORY

Date _____

Name _____ Sex _____ Age _____ Date of birth _____

Grade _____ Sport _____

Personal physician _____

Physician's Address

Physician's Phone

Explain "Yes" answers below:

1. Have you ever been hospitalized? Yes ___ No ___
2. Are you presently taking any medications or pills? Yes ___ No ___
3. Do you have any allergies (medicine, bees or other stinging insects)? Yes ___ No ___
4. Have you ever passed out during or after exercise? Yes ___ No ___
5. Have you ever been dizzy during or after exercise? Yes ___ No ___
6. Have you ever had chest pain during or after exercise? Yes ___ No ___
7. Do you tire more quickly than your friends during exercise? Yes ___ No ___
8. Have you ever had high blood pressure? Yes ___ No ___
9. Have you ever been told that you have a heart murmur? Yes ___ No ___
10. Have you ever had racing of your heart or skipped heartbeats? Yes ___ No ___
11. Has anyone in your family died of heart problems or a sudden death before age 50? Yes ___ No ___
12. Do you have any skin problems (itching, rashes, acne)? Yes ___ No ___
13. Have you ever had a head injury? Yes ___ No ___
14. Have you ever been knocked out or unconscious? Yes ___ No ___
15. Have you ever had a seizure? Yes ___ No ___
16. Have you ever had a stinger, burner or pinched nerve? Yes ___ No ___
17. Have you ever had heat or muscle cramps? Yes ___ No ___
18. Have you ever been dizzy or passed out in the heat? Yes ___ No ___
19. Do you have trouble breathing or do you cough during or after activity? Yes ___ No ___
20. Do you use any special equipment (pads, braces, neck rolls, mouth guard, eye guards, etc)? Yes ___ No ___
21. Have you had any problems with your eyes or vision? Yes ___ No ___
22. Do you wear glasses or contacts or protective eye wear? Yes ___ No ___
23. Have you ever sprained/strained, dislocated, fractured, broken or had repeated swelling or other injuries of any bones or joints? Yes ___ No ___
 ___ Head ___ Shoulder ___ Thigh ___ Neck ___ Elbow ___ Knee ___ Chest ___ Forearm
 ___ Shin/Calf ___ Back ___ Wrist ___ Ankle ___ Hip ___ Hand ___ Foot
24. Have you had any other medical problems (infectious mononucleosis, diabetes, etc.)? Yes ___ No ___
25. Have you had a medical problem or injury since your last evaluation? Yes ___ No ___
26. When was your last tetanus shot? _____
27. When was your last measles immunization? _____
28. When was your first menstrual period? _____
29. When was your last menstrual period? _____
30. When was the longest time between your periods last year? _____

Explain "Yes" answers:

I hereby state that, to the best of my knowledge, my answers to the above questions are correct.

Date _____

Signature of athlete _____ Signature of parent/guardian _____

SUBS\SCHOOLS\MAY\MEDFORM

Pulaski County Special School District Physical Evaluation/History Form

FORM B

Physical Examination _____ Date _____

Name _____ Age _____ Date of birth _____

COMPLETE	LIMITED	Height _____ Weight _____ BP _____ / _____ Pulse _____				
		Vision (R) 20/ _____ (L) 20/ _____ Corrected Y N Pupils _____				
			Normal	Abnormal Findings	Initial	
		Cardiopulmonary				
		Pulses				
		Heart				
	Lungs					
	Tanner Stage	1	2	3	4	5
	COMPLETE	Skin				
		Abdominal				
		Genitalia				
		Musculoskeletal				
		Neck				
		Shoulder				
		Elbow				
Wrist						
Hand						
Back						
Knee						
Ankle						
Foot						
Other						

Clearance: A. Cleared
 B. Cleared After completing evaluation/rehabilitation for _____
 C. Not cleared for: _____ Collision _____ Contact
 _____ Noncontact _____ Strenuous _____ Moderately strenuous _____ Nonstrenuous

Due to: _____

Recommendation: _____

Name of Physician/Medical Personnel _____ Date _____

Address _____ Phone _____

Signature of Physician/Medical Personnel _____

SUBS\SCHOOLS\MAY\MEDFORM

I have reviewed and understand the individual eligibility rules and I am aware that with the participation in sports comes the risk of injury to my child/ward. I understand that the degree of danger and the seriousness of the risk varies significantly from one sport to another with contact sports carrying the higher risk. I have had an opportunity to understand the risk inherent in sports through meetings, written handouts, or some other means. He/she has student accident insurance available through the school (yes__ no__); has athletic participation insurance coverage through the school (yes__ no__); is insured by our family policy with:

Name of Company: _____

Policy Number: _____ Name of Policy Holder: _____

I am aware that participating in sports will involve travel with the team. I acknowledge and accept the risks inherent in the sport and with the travel involved and with this knowledge in mind, grant permission for my child/ward to participate in the sport and travel with the team.

By this signature, I hereby consent to allow the physician(s) and other health care provider(s) selected by myself or the school to perform a pre-participation examination on my child and to provide treatment for any injury or condition resulting from participating in athletics/activities for his/her school during the school year covered by this form. I further consent to allow said physician(s) or health care provider(s) to share appropriate information concerning my child that is relevant to participation in athletics and activities with coaches and other school personnel as deemed necessary.

Additionally I give my consent and approval for the above named student's picture and name to be printed in any high school or PCSD athletic program, publication or video.

PART V - EMERGENCY PERMISSION FORM

(To be completed and signed by parent/guardian)

STUDENT'S NAME _____ GRADE _____ AGE _____

HIGH SCHOOL _____ CITY _____

Please list any significant health problems that might be significant to a physician evaluating your child in case of an emergency

Please list any allergies to medications, etc. _____

Has student been prescribed an inhaler or epipen? _____

Is student presently taking medication? _____ If so, what type? _____

Does student wear contact lenses? _____ Please list date of last tetanus shot _____

EMERGENCY AUTHORIZATION: In the event I cannot be reached in an emergency, I hereby give permission to physicians selected by the coaches and staff of _____ High School to hospitalize, secure proper treatment for and to order injection and/or anesthesia and/or surgery for the person named above.

Daytime phone number (where to reach you in emergency) _____

Evening time phone number (where to reach you in emergency) _____

Signature of parent or guardian _____ Date _____

Relationship to student

*Emergency Permission Form may be reproduced to travel with respective teams and is acceptable for emergency treatment if needed.

I certify all the above information is correct _____

Revised May - 2005

Parent/Guardian Signature

Athletic Parental Consent Form

Student's
Name _____ Grade _____
Sport _____ School
Year _____

CONSENT

I/we hereby give consent to my son/daughter to participate in the above listed interscholastic sports program during the above listed school year. I/we also give permission for **Emergency Medical Treatment** by the team physician, school nurse, athletic trainer, hospital, and allied medical personnel for conditions arising in athletics. I/we realize that such activity involves the potential for injury that is inherent in all sports. I/we acknowledge that even with the best coaching, use of the most advanced protective equipment and strict observance of school rules, injuries are still a possibility. On rare occasions these injuries can be so severe as to result in total disability, paralysis or even death. I/we acknowledge that I/we have read and understand this warning. Further, I/we will not hold Pulaski County Special School District, or its representatives responsible in any way for injuries that may occur to my son/daughter because of his/her participation in the sport listed above.

Further, I/we also give permission for medical information regarding my son/daughter to be shared between the districts physician, nurse, athletic trainer, athletic director, and coach.

Signature of Parent or Guardian **Date**

MEDIA COVERAGE

I hereby grant permission for the release of videotapes, audio recordings, and photographs that could identify my child by name, to the school district and the media for the use in news stories as it pertains to my child and Pulaski County Special School District Athletics. I also grant permission for my child to be interviewed by the school district and the media as it pertains to Pulaski County Special School District athletics.

Signature of Parent or Guardian **Date**

HELMET WARNING!

WARNING: DO NOT STRIKE AN OPPONENT WITH ANY PART OF A FOOTBALL HELMET OR FACEMASK. THIS IS A VIOLATION OF FOOTBALL RULES AND MAY CAUSE YOU TO SUFFER A SEVERE BRAIN OR NECK INJURY, INCLUDING PARALYSIS OR DEATH. SEVERE BRAIN OR NECK INJURY MAY ALSO OCCUR ACCIDENTALLY WHILE PLAYING FOOTBALL. NO HELMET CAN PREVENT SUCH INJURIES. YOU USE THE HELMET AT YOUR OWN RISK.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT.

(Signature of player)

(Today's date)

(Signature of parent or guardian)

(Today's date)