



2020-2021

ATHLETIC HANDBOOK

Including:

Athletic Participation Agreement

Parental Consent/Delegation for Medical Treatment Form

Health Status Questionnaire/ Health Examination Form/ Health
History

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I. Introduction

Interscholastic athletics in the Brunswick Central School District are an extension of the district's physical education program and are intended to be a broadening and value-building experience. Athletics should be offered to as many students as possible. A well-coordinated athletics program can be important to the morale of the school and our community.

PHILOSOPHY

The Brunswick Central School District understands that interscholastic athletics are an important part of the educational process. The combination of academics and athletics enhances the quality of students' lives and expands their options for learning and personal growth. Athletics provide an educational opportunity in which students can learn essential life lessons beyond those that can be learned in an academic classroom.

This reflects our belief that the essential requirement for teamwork, the mental and physical challenges of training and competition, and the experience of winning and losing graciously are important life lessons in every student's developmental experience. These lessons will serve students well in their future.

Developing good character habits requires time and effort. Coaches, parents and other stakeholders can help students develop such habits by continually discussing, modeling, and reinforcing the desired attitudes and beliefs over time.

We also understand that participation on an athletic team or teams demands a commitment that involves both dedication and sacrifice. Making such a commitment helps nurture integrity, pride, loyalty, and overall character. This is required of not only student athletes, but also the coaches and parents.

Everyone involved in the delivery of athletics has a unique opportunity to teach positive life skills and values. Desire, dedication, and self-discipline need to be developed in order to ensure the commitment and personal sacrifice required by athletes.

It is the nature of athletic competition to strive for victory. However, the number of victories should not be the only criterion when determining a season's success. Guiding a team or an individual to attain maximum potential is the ultimate goal. To this end, the coaching staff must teach student athletes to prepare their minds and bodies in order to reach maximum potential, and then to be modest in victory and steadfast in defeat.

II. Academic Eligibility and Behavioral Expectations

Participation in athletics is a privilege, open to students who meet academic eligibility standards and behavioral expectations.

Two or more failures place your child on academic probation. Please see rules below:

EXTRACURRICULAR ACTIVITIES

- A. The Board of Education of the Brunswick Central School District recognizes the importance of the extracurricular life of the school and supports the concept of a diverse extracurricular program to enable each student to achieve full potential. The Board supports the assignment of staff for the formation of student groups for any of the following purposes:
1. Developing academic interests.
 2. Developing athletic interests.
 3. Providing for social interaction and the development of positive social relationships.
- B. Developing understanding of the responsibilities and characteristics of good citizenship.

Students participating in such activities, do so as representatives of the District. Their conduct is expected to be exemplary.

Participation in extracurricular activities is elective and a privilege. It is not an entitlement. Student participation or involvement in activities that reflect poorly on the District or its schools or are in violation of the student code of conduct may result in suspension of such privilege.

- C. Academic Eligibility is determined by the grades a student earns in all courses. If a student receives a failing grade in two or more courses, the student has not met the academic standard, and may not be allowed to participate in or attend athletic games, practices or other school activities (sporting events, non-educational field trips, community service projects, dances, etc.). A grade of 64 or below is considered failing. Interim course grades at the five (5) week mark of each marking period and **quarter course grades** the student earns at the end of each marking period in all classes will be used to determine if the academic standard has been met. This policy applies to all students in grade 6-12. With the first occurrence the student will be placed on academic probation for five (5) weeks. A student on academic probation may fully participate in all extra curricular activities. During this time a student on academic probation **must** meet with his/her teacher(s) with the goal of showing improvement in his/her failing classes. For this improvement to be assessed, the student is required to meet with each of the teachers of the class he/she is failing at least once every five days during this ten school day period. A student who fails to meet with his/her teacher within five days becomes academically ineligible (see below).

Academic eligibility does carry over from the end of one school year to the first 5 weeks of the next school year. If a student is determined to be academically ineligible at the end of the school year, they will be placed on academic probation for the 1st 5 weeks of school, and will be expected to be current with all school work and to be passing all of their new classes until the 1st interim marking period grades are available; all of their teachers will have to sign off on a contact sheet weekly. If a student is not meeting these standards, the student becomes academically ineligible (see below). A student will only be placed on academic probation once while in Middle School and once while in High School, except when placed on probation at the beginning of the school year; this may happen more than once during a student's attendance at Tamarac.

With all subsequent occurrences, the student will be academically ineligible for the next five weeks or until the next interim grades or quarter grades are distributed. If a student is academically ineligible, he/she may not participate in any extracurricular activities for a period of ten school days after becoming academically ineligible. During this time, an academically ineligible student is **strongly encouraged** to meet with his/her teacher(s) with the goal of showing improvement in his/her failing classes. For this improvement to be assessed, the student is required to meet with each of the teachers of the class he/she is failing at least once every five days during this ten school day period. Contact sheets to document the meetings with his/her teachers will be available to each academically ineligible student and can be picked up by an academically ineligible student in the Main Office. When this obligation has been met and the contact sheet has been returned to the Building Principal, the student will be allowed to return to and participate in sports practices and/or school club meetings. He/She may not participate in sports games or other club activities until the next interim grades or quarter grades indicate that the student is now academically eligible. If a student does not initiate contact with his/her teachers or fulfill the expectation of meeting with the teacher(s) of the classes he/she is failing during this ten school day period, he/she will not be able to participate in or attend athletic games, practices or other school activities until the next interim grades or quarter grades indicate that the student is academically eligible.

Summer school grades will not be considered for eligibility purposes. Students new to our school district will not have his/her academic eligibility assessed until he/she has attended our school for five weeks.

The academic eligibility policy is applied at the discretion of the building principal.

This policy reflects the common goals of sustaining academic achievement while participating in extracurricular activities.

STUDENT DISCIPLINE AND ELIGIBILITY

1. If a student chooses to leave school illegally or cuts a class, that student will not be eligible to attend or participate in any after school activity or function on that day. If the infraction is discovered at a later date, the consequences will be applied at that time.
2. Any student receiving in school suspension for 5 or more periods is ineligible to participate in any interscholastic sports contests or practice, extracurricular activities, or functions on that day.
3. Any Middle School student crossing Route 2 or leaving school grounds without going home after school is ineligible to participate in any after school activity that day, including athletic practices or games.

Behavioral Expectations

The four C's – Competence, Character, Civility, and Citizenship cover the behavioral expectations for a Tamarac Athlete.

Competence

- To develop the skills necessary to participate competently in the game.
- To demonstrate knowledge of the rules and conventions of the game.
- To demonstrate knowledge of the strategies of the game.
- To demonstrate a level of physical conditioning and fitness sufficient to participate competently in the game.
- To demonstrate knowledge of healthy behaviors including nutritional issues.
- To understand the necessity of abstaining from the use of tobacco, alcohol, and illegal drugs in order to achieve the positive benefits of interscholastic athletics.

Character

- To be dependable in fulfilling obligations and commitments.
- To accept responsibility for consequences of actions and not to make excuses or blame others.
- To strive to excel; to be committed; to give full effort and persevere in the face of setbacks.
- To demonstrate truthfulness and play by the rules of the game.
- To control anger and frustration and refrain from displays of temper and bad language.
- To accept losing and winning graciously; to congratulate opponents, and display good sportsmanship at all times.

Civility

- To practice good manners on and off the field.
- To refrain from trash talk and other put-downs of opponents and/or own teammates.
- To treat all persons respectfully regardless of individual differences; to show respect for legitimate authority (e.g. Coaches, Officials, Captains).
- To be fair and treat others as one wishes to be treated.
- To listen to and try to understand others.
- To actively support teammates and others.

Citizenship

- To be faithful to the ideals of the game including sportsmanship.
- To keep commitments to team, to show team spirit; to encourage others and contribute to good morale.
- To put the good of the team ahead of personal gain.
- To work well with teammates to achieve team goals.
- To set a good example for teammates, younger athletes, fans and school community.

III. Athletic Department Expectations for Students

Pre-Seasonal

Before any student is able to participate in an athletic program at Tamarac, five major items must be addressed:

- Prior to each season, students must sign up for the sports in which they are interested. Sign-ups will be under the direction of the Athletic Director.
- Once a sign-up sheet has been submitted, students will be scheduled for a physical examination with the school doctor. Appointment slips will be handed out. It is very important that students do not miss their scheduled appointments.
- On the first day of practice, students must turn in their completed health update form and their emergency medical forms to the appropriate coach.
- Students must return the signed Athletic Participation Agreement form to their coach prior to the first practice. The parent/guardian(s) must also sign this form, giving the athlete permission to participate in that sport.
- All athletes should plan to attend any seasonal meeting held by the head coach. The coach will discuss with the athletes the expected conduct, rules and regulations to be used for team selection, practices and the game schedule for the season.

Athletic Placement Process

Students in 7th or 8th grade who wish to participate on a junior varsity or varsity team need to follow the rules of the APP. Students will not be tested nor can they qualify for the program two weeks after the start of each season. Therefore, it is imperative that the athlete's parent(s) contact the Athletic Director at the beginning of the sport season to arrange for this evaluation.

The purpose of APP is to determine the level of physical fitness of your son or daughter when compared to older athletes who will be competing in high school programs. This program has been designed for the exceptional few in each school who would be better served by playing on a higher-level team than age and grade might indicate. It is not intended to fill out rosters at the high school level.

Parents should be cautioned that even though an athlete may be physically ready, it does not mean that he/she may be socially or emotionally ready to handle the normal stress of competition. In order for this evaluation to begin, the following must occur:

- Parent permission must be obtained for the process to continue.
- Medical examination and approval by the school physician with the development and maturity level determined by the school physician in accordance with established criteria for the level of a particular sport.
- The Athletic Director will then administer the five-item athletic performance test. The athlete must meet or exceed the criteria established for the level of participation desired.

Seasonal

1. It is expected that all athletes attend school regularly and on time. Pupils must be in attendance a minimum of a half-day on the day of any contest or practice in order to participate. For a Saturday contest, they must be in attendance on the preceding Friday.

NOTE: The cut off for a half-day is 11:15 a.m. If a student misses more than half a day for extenuating circumstances (i.e. medical appointment, college visit) permission to play or practice may be granted if the student and/or parent notifies the athletic director or high school principal prior to being absent. The student athlete is responsible for making up missed work. It is important to note that a team returning from a game the night before should not use this as an excuse to show up late to school the next day. This will not be tolerated.

2. For any reason, if a student/athlete misses seven (7) consecutive school days or more he/she may not participate in a game until he/she has practiced for three (3) days. (For extenuating circumstances permission to play may be granted with prior approval from the principal or assistant principal.)
3. All athletes are expected to be prepared daily and participate in their physical education class to be allowed to participate in practice or the game that day.
4. No athlete shall have unauthorized possession of ANY athletic equipment. (Tamarac's or any other schools.)
5. Cleats ARE NOT to be worn in the building or on the buses at any time.
6. Athletes are reminded that school issued apparel are to be worn ONLY when directly involved with the team.
7. On non-school days, athletes are NOT allowed in the building before or after games or practices unless their coach is in the building.
8. Athletes are expected to report to practice immediately after school. However, due to crowded gyms in the winter, athletes may have to wait for a practice to begin. Students scheduled for 4:00 p.m. practice who stay in the building MUST report to the supervised area (typically the High School cafeteria) designated by the administration.
9. Failure to report for a scheduled practice, game or match without being excused could result in suspension or dismissal from the team. (See individual coaches.)
10. Athletes participating in every sport must follow the Wasaren League statement on Player Conduct, located on page 11 and 12 in this handbook.

11. Athletes must see that they are ready on time and in the proper location designated by their coach for all home and away contests.
12. If a Varsity or JV athlete is dismissed/quits a team, he/she may not participate on another team in the same season. Modified athletes may change teams within the first week of the sport.
13. If an athlete is selected for a team and wishes to move to a different sport in the same season, he/she must petition the athletic director within the first two (2) weeks of the playing season for this change. The decision will be at the discretion of the athletic director in consultation with coaches and administration.
14. No athlete will use or distribute alcohol or illegal drugs during their sports eligibility at Tamarac. This includes activities both on and off campus.

The training rules and their consequences will be enforced for the duration of an athlete's competitive time in high school. Therefore, when a student-athlete begins participation, these rules and consequences will be followed regarding alcohol or illegal drug related offenses.

1st offense – Student-athlete is suspended from all athletic participation for twenty-five (25) school days.

2nd offense – Student-athlete is suspended from athletic participation for sixty (60) school days. The student-athlete and his/her parents may petition the Athletic Director for reinstatement if the student-athlete has successfully completed an alcohol or drug rehabilitation program.

3rd offense – Student-athlete is suspended from athletic participation for at least one full calendar year. The student-athlete would be required to successfully complete an alcohol or drug rehabilitation program to seek athletic participation after the one year period. No appeals, no pardon.

Beyond this level the student-athlete will be denied the ability to participate in athletics for the remainder of his/her career at Tamarac School. No appeals, no pardon.

15. Any athlete who is placed on OUT-OF-SCHOOL suspension is automatically removed from all team activities for the duration of the suspension period. If a student is placed in IN-SCHOOL suspension for 5 or more periods, he/she is not eligible to participate in games or practices that day.
16. All athletes are reminded that the team locker room is off limits during and after the school day unless the coach is present to supervise.
17. Should an athlete (or parent) have concerns, he/she should follow the proper chain of command to address the concern. (Coach-Athletic Director-Principal-Superintendent- Board of Education)

Practice Sessions

1. Require between one and one-half and two hours of actual student participation and will usually be held on each weekday on which there is no contest. Sunday practices, after 1:00 p.m. and holiday practices are allowed only upon administrative approval.

Practice Schedules

1. Will be provided a minimum of one week ahead of time whenever possible.
2. Athletes are reminded to be on time for all practice sessions and games. It is also a responsibility of the athlete to see that he/she has a ride home within a short time after a scheduled practice, game or bus return. Athletes ARE NOT to be in the building without a coach's supervision.

Post Seasonal

1. All uniforms and equipment must be turned into the coach no later than one week from the day of the last contest.

NOTE: Missing or misused equipment will be charged to the individual, and the athlete will not be allowed to participate in a succeeding sport until it is returned or paid for. No awards will be given to an athlete who has outstanding/missing uniforms or equipment.

2. All athletes must see to it that their team room locker is cleaned out immediately after their last contest.

In Case of Injury

1. In the event of an injury, the athlete and/or parent must report to the school nurse at his/her earliest opportunity so that necessary family and physician requirements for insurance forms can be completed.
2. Once an injured athlete has seen a physician he/she MAY NOT participate in any way with the team until all necessary steps have been taken to secure the proper medical release.
NOTE: The necessary steps are:
 - a. Medical approval from the attending physician and/or papers from physicians at the emergency room.
 - b. Medical approval from school physician or personal physician.
3. The school district carries insurance, which will supplement the athlete's family policy. Athletes and parents should save all bills that are related to an injury. Any bills that ARE NOT covered by the family insurance may be submitted to the school's insurance company for consideration.

IV. Conduct

In School and the Community

1. Mutual respect among students, staff, and community is expected. Disrespect includes use of profanity and failure to obey reasonable requests by a staff member. Racist, sexist, derogatory, abusing, or *hazing* behaviors will not be tolerated.

Definition of Hazing: To annoy any student by playing abusive or ridiculous tricks, to frighten, scold, beat (or harass), or to subject him/her to personal indignity (site: www.unca.edu/content/policies-rights.html).

- Hazing is often grounded in drinking, humiliation and/or physical abuse.
 - The best indicator of hazing is “intent”. Is the primary intent to humiliate? If so, it is hazing. Such offensive behaviors toward individuals or groups of students will result in disciplinary action and possible loss of eligibility.
2. Student-athletes will receive neither special privileges nor special penalties in their studies or in their school conduct.
 3. Participants must realize that they, more than any other single group of students, are in the eye of the citizens of the school district. It follows that such representation entails responsibilities on the part of the athlete to maintain the highest possible standards of conduct at all times – IN OR OUT OF SEASON!

On Trips Away from Home

1. Players are required to ride on the team bus to all away games and scrimmages, unless other arrangements have been approved by the administration and coach.
2. Athletes must ride the bus to and from contests, unless they have given to their coach a written request from their parents and the parents come directly to the coach to take them home.
3. Athletes are required to follow the individual coach’s standards.
4. Players are reminded that they are to be quiet and respectful upon arrival at the host school, and that the dressing and showering areas must receive the same consideration expected to be given those at home.

Bus Rules for Athletic Trips

1. No glass containers can be brought on the bus.
2. Cleats must be taken off before entering the bus and kept in a plastic bag or cleaned outside the bus. Muddy uniforms should be changed before entering the bus.
3. Overall, all athletes are to follow directions given by the bus driver.

Tamarac High School
Parent/Guardian and Spectator Code of Conduct

The essential elements of character building and ethics in athletics are embodied in the concept of sportsmanship and six core principles: trustworthiness, respect, responsibility, fairness, caring and good citizenship. The highest potential of athletics is achieved when competition reflects these "six pillars of character".

Therefore while attending home and away events:

1. I will refrain from coaching my child or other players during games and practices.
2. I will respect the officials and their authority during games.
3. I will never question, discuss or confront coaches at the game field, and will take time to speak to coaches at an agreed upon time and place.
4. I will remember that student athletes participate to have fun and that the game is for youth, not adults.
5. I will teach my child that doing one's best is more important than winning, so that my child will never feel defeated by the outcome of a game or his or her performance.
6. I will require my child treat other players, coaches, officials, and spectators with respect regardless of race, creed, color, sex or ability.
7. I will promote the emotional and physical well being of the student athletes ahead of any personal desire I may have for my own child to win.
8. I will not encourage any behaviors or practices that would endanger the health and well being of the student athletes.
9. I will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all players, coaches, officials, and spectators at every game, practice or sporting event.
10. I will not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parent such as booing and taunting; refusing to shake hands; or using profane language or gestures.
11. I understand that any violation of this code of conduct may be cause for dismissal, suspension or permanent expulsion from future athletic contest(s).

The school district will take the appropriate steps listed below if administrative consequences are necessary, (One or more of the violations may be applied)

1. Verbal warning issued and documented by a game official, chaperone and/or school official.
2. If behavior continues suspension or immediate ejection from the sports event will be issued by a game official, chaperone and/or school official.
3. The Athletic Advisement Committee (or its designees) will meet to determine whether anyone suspended or ejected may attend future athletic events. The offender(s) will have an opportunity to meet with the Athletic Advisement Committee. The following actions may be taken by the committee:
 - a. The initial suspension or ejection is an adequate consequence. The incident is documented and any violations of the Code of Conduct in the future will have more severe consequences.
 - b. Suspension from multiple sports events (home and/or away). Any misconduct during or after the suspension may cause the Athletic Advisement Committee (or its designees) to pursue Action C.
 - c. Season suspension or multiple season suspension issued with approval from the Board of Education.

Sportsmanship

TAMARAC BENGALS ARE A CLASS ACT!

Good sportsmanship is a top priority for the Brunswick Central School District. Good sportsmanship is a commitment to fostering ethical behavior and integrity. It is defined as displaying generosity and concern for others. All individuals are expected to be aware of his/her influence on the behavior of others and model good sportsmanship at all times. Displaying proper conduct is a concern that includes all participants, coaches, parents/guardians, and spectators. The guidelines listed below are expectations for appropriate behavior at all athletic contests:

1. To be a good host by treating visitors as guests.
2. To treat opponents with respect.
3. To respect the judgment of the contest officials and coaches.
4. To avoid profane and abusive language.
5. To avoid inappropriate behavior.
6. To place the emotional and physical well-being of everyone first and foremost.
7. To encourage a positive and enjoyable experience for all.

Any individual who chooses to ignore these guidelines will be subject to removal from the contest. Please remember that these contests are only games.

V. Awards

It is the policy of the Brittonkill School District to offer a variety of awards at the end of a sport season and at the end of the school year.

Team Awards

Coaches may choose to give one or more of the following awards at the end of their sports season: Most Valuable Player, Most Improved Player, Coach's Award and Sportsmanship. Recognition to each of the athletes selected by the coach and/or team will be given.

Special Senior Awards:

1. Senior Trophy/Plaque – A trophy/plaque will be awarded to any athlete who has earned at least six varsity letters throughout their high school career.
2. Scholarship Award – A trophy/plaque will be awarded to the boy and girl (chosen from the top five academic students) who has played either two sports or two varsity seasons during their high school career.
3. Sportsmanship – A trophy/plaque will be awarded to the boy and girl who have displayed outstanding Sportsmanship while participating in the Tamarac Athletic Program. (Coachability, willingness to help, team/school spirit and effort will be taken into consideration for this award.)

4. Most Improved Senior Athlete – A trophy/plaque will be awarded to the boy and girl who participated in at least two varsity sports while a senior, and who, in the eyes of the varsity coaches of each gender, have shown the greatest amount of overall improvement in their ability to play a given sport or sports.
5. Outstanding Senior Athlete – a trophy/plaque will be awarded to the boy and girl who participated in at least two varsity sports while a senior, and who, in the eyes of the varsity coaches of each gender, have displayed outstanding athletic skills, contributed greatly to the success of a team or teams, and have exhibited characteristics that one would consider model for any athletic program. (In exceptional circumstances a one-sport athlete may be considered.)

VI. WASAREN League Statement on Coach and Player Conduct Code

Coaches

Coaching is by nature an intense and emotional situation. It frequently places coaches in a position of making choices between the pressures of achieving short-term success, and the long-range educational goals of character development and exemplary behavior expected of all our athletes.

The coach's behavior and attitude toward the game, its participants, and officials sets the tone for players. It is inconsistent for coaches to be abusive or intolerant of officials and expect students to treat the officials with respect. There are well-defined procedures and channels to follow when there is dissatisfaction with an official's performance. Each coach has the prerogative of rejecting a limited number of officials on a seasonal basis.

Each sport is governed by many sets of rules and regulations. It is incumbent on each coach to be thoroughly familiar with all phases including National Federation or NAGWS Rules, the Handbook of the N.Y.S.P.H.S.A.A., Section II and WASAREN League Regulations. It is not sufficient to follow just the framework of these rules. The spirit and intent should be of equal concern and complied with fully. We cannot expect the students to have respect for, and follow rules, if the coaches are not meticulous in following the rules themselves.

Players

Participating in an interscholastic sport is an honor and a privilege. It is also a responsibility which demands extra commitment. Standards of behavior are high and a willingness to live up to them is part of being a member of a team. A player's attitude and behavior can directly influence the crowd's behavior. Unsportsmanlike conduct will not be tolerated at any time.

The coach of a team is expected to control his/her team and reprimand his/her players for inappropriate conduct. The administrator in charge must deal with any case that the coach cannot or will not handle.

League action will be taken on extreme cases. It is expected that this will be rarely necessary.

VII. Section II Code of Conduct for Spectators

1. Spectators are an important part of the games and are encouraged to conform to accepted standards of a good sportsmanship and behavior.
2. Spectators should at all times respect officials, visiting coaches, players, and cheerleaders as guests in the community and extend all courtesies to them.
3. Enthusiastic cheering for one's own team is encouraged.
4. Booing, whistling, stamping of feet and disrespectful remarks shall be avoided.
5. There will be no ringing of bells, sounding of horns, or other noisemakers at indoor contest during play. Anyone who does not abide by this rule will be asked to leave the premises.
6. Pep bands or school bands, under the supervision of school personnel, may play during times outs, between periods, or at halftime. Bands must coordinate their play so as not to interfere with a cheerleading squad on the floor or field.
7. The throwing of debris, confetti, or other objects from the stands is prohibited. Offending individuals will be asked to leave the premises.
8. During a free throw in basketball, all standard courtesies should be extended.
9. Spectators should encourage each other to practice courteous behavior. Improper behavior should be reported to school authorities.
10. Spectators will observe the rules of the local school concerning smoking, food & drink consumption, littering, and parking procedures.
11. Spectators will respect and obey all school officials and supervisors at athletic contests.

(Adopted by Section II Athletic Council, June 1990)

VIII. Safety Information

CONCUSSIONS

The Concussion Management and Awareness Act went into effect on July 1, 2012 for public schools and charter schools in New York State.

Although the district will take reasonable care to protect student athletes, students may still sustain injuries. In order to most effectively ensure the student safety, open communication between students, parents and coaches about the child's medical condition is critical. Coaches, and other appropriate staff, will receive guidance and training regarding recognition of injury and removal of the student athlete from play in the event of injury. Parents and/or students are expected to report injuries so that the students' health can be protected.

In the case of a suspected or actual head injury, a student **MUST** be removed from play immediately. In order to resume participation following a head injury, the student needs to receive medical clearance from the school's medical doctor.

You are asked to review the enclosed information: Concussions: The Invisible Injury. A Student and Parent Information Sheet.



Concussions: The Invisible Injury

Student and Parent Information Sheet

CONCUSSION DEFINITION

A concussion is a reaction by the brain to a jolt or force that can be transmitted to the head by an impact or blow occurring anywhere on the body. Essentially a concussion results from the brain moving back and forth or twisting rapidly inside the skull.

FACTS ABOUT CONCUSSIONS ACCORDING TO THE CENTER FOR DISEASE CONTROL (CDC)

- An estimated 4 million people under age 19 sustain a head injury annually. Of these approximately 52,000 die and 275,000 are hospitalized.
- An estimated 300,000 sports and recreation related concussions occur each year.
- Students who have had at least one concussion are at increased risk for another concussion.

In New York State in 2009, approximately 50,500 children under the age of 19 visited the emergency room for a traumatic brain injury and of those approximately 3,000 were hospitalized.

REQUIREMENTS OF SCHOOL DISTRICTS

Education:

- Each school coach, physical education teacher, nurse, and athletic trainer will have to complete an approved course on concussion management on a biennial basis, starting with the 2012-2013 school year.
 - * School coaches and physical education teachers must complete the CDC course. (www.cdc.gov/concussion/HeadsUp/online_training.html)
 - * School nurses and certified athletic trainers must complete the concussion course. (<http://preventingconcussions.org>)

Information:

- Provide concussion management information and sign off with any parental permission form.
- The concussion management and awareness information or the State Education Department's web site must be made available on the school web site, if one exists.

Removal from athletics:

- Require the immediate removal from athletic activities of any pupil that has or is believed to have sustained a mild traumatic brain injury.
- No pupils will be allowed to resume athletic activity until they have been symptom free for 24 hours and have been evaluated by and received written and signed authorization from a licensed physician. For interscholastic athletics, clearance must come from the school medical director.
 - * Such authorization must be kept in the pupil's permanent health record.
 - * Schools shall follow directives issued by the pupil's treating physician.

SYMPTOMS

Symptoms of a concussion are the result of a temporary change in the brain's function. In most cases, the symptoms of a concussion generally resolve over a short period of time; however, in some cases, symptoms will last for weeks or longer. Children and adolescents are more susceptible to concussions and take longer than adults to recover.

It is imperative that any student who is suspected of having a concussion is removed from athletic activity (e.g. recess, PE class, sports) and remains out of such activities until evaluated and cleared to return to activity by a physician.

Symptoms include, but are not limited to:

- Decreased or absent memory of events prior to or immediately after the injury, or difficulty retaining new information
- Confusion or appears dazed
- Headache or head pressure
- Loss of consciousness
- Balance difficulties, dizziness, or clumsy movements
- Double or blurry vision
- Sensitivity to light and/or sound
- Nausea, vomiting and/or loss of appetite
- Irritability, sadness or other changes in personality
- Feeling sluggish, foggy or light-headed
- Concentration or focusing problems
- Drowsiness
- Fatigue and/or sleep issues – sleeping more or less than usual

Students who develop any of the following signs, or if signs and symptoms worsen, should be seen and evaluated immediately at the nearest hospital emergency room.

- Headaches that worsen
- Seizures
- Looks drowsy and/or cannot be awakened
- Repeated vomiting
- Slurred speech
- Unable to recognize people or places
- Weakness or numbing in arms or legs, facial drooping
- Unsteady gait
- Change in pupil size in one eye
- Significant irritability
- Any loss of consciousness
- Suspicion for skull fracture: blood draining from ear or clear fluid from the nose

STATE EDUCATION DEPARTMENT'S GUIDANCE FOR CONCUSSION MANAGEMENT

Schools are advised to develop a written concussion management policy. A sample policy is available on the NYSPHSAA web site at www.nysphsaa.org. The policy should include:

- A commitment to reduce the risk of head injuries.
- A procedure and treatment plan developed by the district medical director.
- A procedure to ensure proper education for school nurses, certified athletic trainers, physical education teachers, and coaches.
- A procedure for a coordinated communication plan among appropriate staff.
- A procedure for periodic review of the concussion management program.

RETURN TO LEARN and RETURN TO PLAY PROTOCOLS

Cognitive Rest: Activities students should avoid include, but are not limited to, the following:

- Computers and video games
- Television viewing
- Texting
- Reading or writing
- Studying or homework
- Taking a test or completing significant projects
- Loud music
- Bright lights

Students may only be able to attend school for short periods of time. Accommodations may have to be made for missed tests and assignments.

Physical Rest: Activities students should avoid include, but are not limited to, the following:

- Contact and collision
- High speed, intense exercise and/or sports
- High risk for re-injury or impacts
- Any activity that results in an increased heart rate or increased head pressure

Return to Play Protocol once symptom free for 24 hours and cleared by School Medical Director:

Day 1: Low impact, non strenuous, light aerobic activity.

Day 2: Higher impact, higher exertion, moderate aerobic activity. No resistance training.

Day 3: Sport specific non-contact activity. Low resistance weight training with a spotter.

Day 4: Sport specific activity, non-contact drills. Higher resistance weight training with a spotter.

Day 5: Full contact training drills and intense aerobic activity.

Day 6: Return to full activities with clearance from School Medical Director.

Any return of symptoms during the return to play protocol, the student will return to previous day's activities until symptom free.

CONCUSSION MANAGEMENT TEAM

Schools may, at their discretion, form a concussion management team to implement and monitor the concussion management policy and program. The team could include, but is not limited to, the following:

- Students
- Parents/Guardians
- School Administrators
- Medical Director
- Private Medical Provider
- School Nurse
- Director of Physical Education and/or Athletic Director
- Certified Athletic Trainer
- Physical Education Teacher and/or Coaches
- Classroom Teachers

OTHER RESOURCES

- New York State Education Department
<http://www.p12.nysed.gov/sss/schoolhealth/schoolhealthservices>
- New York State Department of Health
http://www.health.ny.gov/prevention/injury_prevention/concussion/htm
- New York State Public High School Athletic Association
www.nysphsaa.org/safety/
- Center for Disease Control and Prevention
<http://cdc.gov/TraumaticBrainInjury>
- National Federation of High Schools
www.nfhslearn.com – The FREE Concussion Management course does not meet education requirement.
- Child Health Plus
http://www.health.ny.gov/health_care/managed_care/consumer_guide/about_child_health_plus.htm
- Local Department of Social Services – New York State Department of Health
http://www.health.ny.gov/health_care/medicaid/ldss/htm
- Brain Injury Association of New York State
<http://www.bianys.org>
- Nationwide Children's Hospital – Concussions in the Classroom
<http://www.nationwidechildrens.org/concussions-in-the-classroom>
- Upstate University Hospital – Concussions in the Classroom
<http://www.upstate.edu/pmr/healthcare/programs/concussion/classroom.php>
- ESPN Video – Life Changed by Concussion
<http://espn.go.com/video/clip?id=7525526&categoryId=5595394>
- SportsConcussions.org
<http://www.sportsconcussions.org/ibaseline/>
- American Association of Neurological Surgeons
<http://www.aans.org/Patient%20Information/Conditions%20and%20Treatment/Concussion.aspx>
- Consensus Statement on Concussion in Sport – Zurich
<http://sportconcussions.com/html/Zurich%20Statement.pdf>



HEAT INDEX PROCEDURES

Administration of Heat Index Procedures:

- Feels Like Temperature (Heat index) or THI using a Wet Bulb indicator on the field will be checked 1 hour before the contest/practice by a certified athletic trainer, athletic director, or school designee when the air temperature is 80 degrees (Fahrenheit) or higher.
- Download WeatherBug app to your phone or log into www.weatherbug.com. Schools may also use a Wet Bulb indicator on the field that will be used.
- Enter zip code or city and state in the location section of the app or on-line or determine the THI by using a Wet Bulb indicator.
- If the Feels Like temperature (heat index) or the Wet Bulb Indicator is 90 degrees or above, the athletic trainer, athletic director, or school designee must re-check the Feels Like temperature (heat index) or Wet Bulb indicator at halftime or midway point of the contest. If the Feels Like temperature (heat index) or Wet Bulb indicator is 96 degrees (Fahrenheit) or more, the contest will be suspended.

Please refer to the following chart to take the appropriate actions:

	Feels Like Temp(Heat Index) or Wet Bulb indicator under 79 degrees	Full activity. No restrictions
R E C O M M E N D E D	Heat Index Caution: Feels Like Temp (Heat Index) or Wet Bulb indicator 80 degrees to 85 degrees	Provide ample water and multiple water breaks. Monitor athletes for heat illness. Consider reducing the amount of time for the practice session.
	Heat Index Watch: Feels Like Temp (Heat Index) or Wet Bulb indicator 86 degrees to 90 degrees	Provide ample water and multiple water breaks. Monitor athletes for heat illness. Consider postponing practice to a time when Feels Like temp is lower. Consider reducing the amount of time for the practice session. 1 hour of recovery time for every hour of practice (ex. 2hr practice = 2hr recovery time).
	Heat Index Warning: Feels Like Temp (Heat Index) or Wet Bulb Indicator 91 degrees to 95 degrees	Provide ample water and water breaks every 15 minutes. Monitor athletes for heat illness. Consider postponing practice to a time when Feels Like temp is much lower. Consider reducing the amount of time for the practice session. 1 hour of recovery time for every hour of practice (ex. 2hr practice = 2hr recovery time). Light weight and loose fitting clothes should be worn. For Practices only Football Helmets should be worn. No other protective equipment should be worn.
REQUIRED	Heat Index Alert: Feels Like Temp (Heat Index) or Wet Bulb indicator 96 degrees or greater	No outside activity, practice or contest, should be held. Inside activity should only be held if air conditioned.

Approved May 1, 2010
Updated July 27, 2016

NYSPHSAA
THUNDER & LIGHTNING POLICY

(Effective 10/25/04)
(Revised October 20, 2008)

Applies to regular season through NYSPHSAA Finals:

1) Thunder and lightning necessitates that contests be suspended. The occurrence of thunder and/or lightning is not subject to interpretation or discussion - thunder is thunder, lightning is lightning.

a) With your site administrator, set up a plan for shelter prior to the start of any contest.

2) When thunder is heard and/or when lightning is seen, the following procedures should be adhered to:

a) Suspend play and direct participants to go to shelter, a building normally occupied by the public or if a building is unavailable, participants should go inside a vehicle with a solid metal top (e.g. bus, van, car).

b) Do not permit people to stand under or near a tree; and have all stay away from poles, antennas, towers and underground watering systems.

c) After thunder and/or lightning have left the area, wait 30 minutes after the last boom is heard or strike is seen before resuming play or competition.

IX. Forms

BRUNSWICK CENTRAL SCHOOL DISTRICT
Athletic Participation Agreement

PLEASE RETURN THIS FORM TO YOUR COACH BY THE FIRST PRACTICE.

I, _____, have read and understand my responsibilities and

(print athlete's full name)

the consequences of my actions as written in the 2020-2021 Athletic Handbook and wish to participate in

_____ during the _____ season.
(name sport and level)

Date: _____ Athlete's Signature: _____

I have read the Athletic Participation Agreement including the health guidelines attached to this booklet and give permission for my son/daughter to participate in an interscholastic athletics program for Tamarac Secondary School under the provisions of the Athletic Handbook as written.

Parent/Guardian name: _____
(please print)

Parent/Guardian Signature: _____
(date)

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Preferred E-mail: _____

To participate in Interscholastic Athletics, students must:

1. Be approved by a doctor to participate on an interscholastic team.
 2. Sign and return the Athletic Participation Agreement
 3. Have a parent/guardian sign the Athletic Participation Agreement granting permission for the student to participate in interscholastic athletics.
 4. Have parent/guardian complete and return the emergency medical form.
-

PARENTAL CONSENT/DELEGATION FOR MEDICAL TREATMENT

Parent/Legal Guardian of (name of child) _____ hereby authorizes the personnel of the Brunswick Central School District to grant consent to any physician he or she deems appropriate to conduct the required tests and provide necessary medical treatment/care to the above named child IF I OR MY SPOUSE CANNOT BE REACHED.

Child's Date of Birth: _____

Date of Child's Last Tetanus Immunization: _____

Pertinent Medical Date: (Allergies, asthma, seizures, etc. Also include any medication your child is on relative to the condition.) _____

Medical Restrictions: _____

Parent/Legal Guardian:

Mother's Name: _____

Father's Name: _____

Home Address: _____

Home Address: _____

Home Telephone No.: _____

Home Telephone No.: _____

Place of Employment: _____

Place of Employment: _____

Work Telephone No.: _____

Work Telephone No.: _____

Cell Phone No.: _____

Cell Phone No.: _____

Parent/Legal Guardian Signature: _____

Printed Name: _____ Date: _____

Authorization expires at the end of the present school year.

ACKNOWLEDGEMENT

STATE OF NEW YORK)
 :SS
COUNTY)

On this _____ day of _____, 20_____, before me personally appeared _____, to me known to be the person(s) described in and who executed the foregoing instrument, and acknowledged that he/she (they) executed the same as his/her free act and deed.

Notary Public

CONCUSSION INFORMATION
AND
INTERSCHOLASTIC SPORTS PERMISSION FORM

Dear Parent/Guardian:

CONCUSSION INFORMATION

Your son/daughter is a candidate for one of the interscholastic athletic teams sponsored by the Brunswick/Brittonkill School District (“District”).

As you know, physical injuries may occur as a result of participation in any sport. Concussions are among the types of injuries that may occur during interscholastic sports activities.

A concussion is a type of traumatic brain injury caused by an impact or blow to the head or body. Concussions can happen in any sport, but are most often associated with contact sports such as football, rugby, or ice hockey.

Symptoms of a concussion include, but are not necessarily limited to:

- Amnesia (*e.g.* decreased or absent memory of events prior to or immediately after the injury, or difficulty retaining new information)
- Confusion or appearing dazed
- Headache or head pressure
- Loss of consciousness
- Balance difficulty or dizziness, or clumsy movements
- Double or blurry vision
- Sensitivity to light and/or sound
- Nausea, vomiting, and/or loss of appetite
- Irritability, sadness or other changes in personality
- Feeling sluggish, foggy, groggy, or lightheaded
- Concentration or focusing problems
- Slowed reaction times, drowsiness
- Fatigue and/or sleep issues (*e.g.* sleeping more or less than usual)

All coaches, physical education teachers, and certified athletic trainers are required to be trained to recognize the symptoms of a concussion and to seek proper medical treatment for such injuries.

The District’s policies provide for the immediate removal from athletic activities of any student who has sustained, or is believed to have sustained a concussion. If there is any doubt as to whether the student has sustained a concussion, it shall be presumed that he or she has sustained a concussion until proven otherwise. A student is prohibited from resuming athletic activities until he or she has been symptom-free for not less than 24 hours, and has been evaluated by, and received a written and signed authorization from a licensed physician. This authorization must then be submitted to the school nurse who will contact the District’s Medical Director to seek clearance. In order to resume participation in interscholastic sports activities, the student must receive clearance from the District’s Medical Director to participate in such activities. The District will follow any directives issued by the student’s treating physician with regard to limitations and/or restrictions on activities for the student.

Detailed information on concussions can be found on the websites of the New York State Education Department (“SED”) and the New York State Department of Health (“DOH”). *See* <http://www.p12.nysed.gov/sss/schoolhealth/schoolhealthservices/ConcussionManageGuidelines.pdf> Among other things, the Guidelines recommend a gradual return to physical activities following any concussion. We urge you to read the information posted on the SED and DOH websites prior to your child’s participation in any athletic activities.

PARENT/GUARDIAN CONSENT

By signing below, I signify that I understand that there are risks inherent in permitting my son or daughter to participate in interscholastic athletics, including the risk of serious physical injuries, including but not limited to concussions. This consent to my child’s participation is given with the knowledge that participation in interscholastic athletics can present inherent risks of injury that no amount of care, caution, instruction, expertise or supervision can eliminate. Mindful of these risks, I voluntarily give my permission for my son/daughter to participate in interscholastic athletics.

By signing below, I further acknowledge that I have read and understand the above statements regarding concussions. I further agree to promptly inform the District in the event my child sustains a concussion outside of school so that appropriate safeguards can be taken with respect to his or her participation in interscholastic athletics.

Dated: _____

Parent/Guardian Signature

Parent/Guardian (print name)

Student (print name)

REQUIRED NYS SCHOOL HEALTH EXAMINATION FORM

TO BE COMPLETED IN ENTIRETY BY PRIVATE HEALTH CARE PROVIDER OR SCHOOL MEDICAL DIRECTOR

Note: NYSED requires a physical exam for new entrants and students in Grades Pre-K or K, 1, 3, 5, 7, 9 & 11; annually for interscholastic sports; and working papers as needed; or as required by the Committee on Special Education (CSE) or Committee on Pre-School Special education (CPSE).

STUDENT INFORMATION

Name:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	DOB:
School:	Grade:	Exam Date:

HEALTH HISTORY

Allergies <input type="checkbox"/> No <input type="checkbox"/> Yes, indicate type	<input type="checkbox"/> Medication/Treatment Order Attached	<input type="checkbox"/> Anaphylaxis Care Plan Attached
---	--	---

Food Insects Latex Medication Environmental

Asthma <input type="checkbox"/> No <input type="checkbox"/> Yes, indicate type	<input type="checkbox"/> Medication/Treatment Order Attached	<input type="checkbox"/> Asthma Care Plan Attached
--	--	--

Intermittent Persistent Other : _____

Seizures <input type="checkbox"/> No <input type="checkbox"/> Yes, indicate type	<input type="checkbox"/> Medication/Treatment Order Attached	<input type="checkbox"/> Seizure Care Plan Attached
--	--	---

<input type="checkbox"/> Yes, indicate type	<input type="checkbox"/> Type: _____	Date of last seizure: _____
---	--------------------------------------	-----------------------------

Diabetes <input type="checkbox"/> No <input type="checkbox"/> Yes, indicate type	<input type="checkbox"/> Medication/Treatment Order Attached	<input type="checkbox"/> Diabetes Medical Mgmt. Plan Attached
--	--	---

<input type="checkbox"/> Yes, indicate type	<input type="checkbox"/> Type 1 <input type="checkbox"/> Type 2 <input type="checkbox"/> HbA1c results: _____ Date Drawn: _____
---	--

Risk Factors for Diabetes or Pre-Diabetes:
 Consider screening for T2DM if BMI% > 85% and has 2 or more risk factors: Family Hx T2DM, Ethnicity, Sx Insulin Resistance, Gestational Hx of Mother; and/or pre-diabetes.

Hyperlipidemia: <input type="checkbox"/> No <input type="checkbox"/> Yes	Hypertension: <input type="checkbox"/> No <input type="checkbox"/> Yes
--	--

PHYSICAL EXAMINATION/ASSESSMENT

Height:	Weight:	BP:	Pulse:	Respirations:
TESTS	Positive	Negative	Date	Other Pertinent Medical Concerns
PPD/ PRN	<input type="checkbox"/>	<input type="checkbox"/>		One Functioning: <input type="checkbox"/> Eye <input type="checkbox"/> Kidney <input type="checkbox"/> Testicle
Sickle Cell Screen/PRN	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Concussion – Last Occurrence: _____

Lead Level Required Grades Pre- K & K	Date	<input type="checkbox"/> Mental Health: _____ <input type="checkbox"/> Other: _____
--	------	--

Test Done Lead Elevated > 10 µg/dL

System Review and Exam Entirely Normal

Check Any Assessment Boxes Outside Normal Limits And Note Below Under Abnormalities

<input type="checkbox"/> HEENT	<input type="checkbox"/> Lymph nodes	<input type="checkbox"/> Abdomen	<input type="checkbox"/> Extremities	<input type="checkbox"/> Speech
<input type="checkbox"/> Dental	<input type="checkbox"/> Cardiovascular	<input type="checkbox"/> Back/Spine	<input type="checkbox"/> Skin	<input type="checkbox"/> Social Emotional
<input type="checkbox"/> Neck	<input type="checkbox"/> Lungs	<input type="checkbox"/> Genitourinary	<input type="checkbox"/> Neurological	<input type="checkbox"/> Musculoskeletal

Assessment/Abnormalities Noted/Recommendations:	Diagnoses/Problems (list)	ICD-10 Code
	_____	_____
	_____	_____
	_____	_____

Additional Information Attached

Name:		DOB:	
SCREENINGS			
Vision	Right	Left	Referral
Distance Acuity	20/	20/	<input type="checkbox"/> Yes <input type="checkbox"/> No
Distance Acuity With Lenses	20/	20/	
Vision – Near Vision	20/	20/	
Vision – Color <input type="checkbox"/> Pass <input type="checkbox"/> Fail			
Hearing	Right dB	Left dB	Referral
Pure Tone Screening		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Scoliosis Required for boys grade 9	Negative	Positive	Referral
And girls grades 5 & 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Deviation Degree:	Trunk Rotation Angle:		
Recommendations:			
RECOMMENDATIONS FOR PARTICIPATION IN PHYSICAL EDUCATION/SPORTS/PLAYGROUND/WORK			
<input type="checkbox"/> Full Activity without restrictions including Physical Education and Athletics.			
<input type="checkbox"/> Restrictions/Adaptations		Use the Interscholastic Sports Categories (below) for Restrictions or modifications	
<input type="checkbox"/> No Contact Sports		Includes: baseball, basketball, competitive cheerleading, field hockey, football, ice hockey, lacrosse, soccer, softball, volleyball, and wrestling	
<input type="checkbox"/> No Non-Contact Sports		Includes: archery, badminton, bowling, cross-country, fencing, golf, gymnastics, rifle, Skiing, swimming and diving, tennis, and track & field	
<input type="checkbox"/> Other Restrictions:			
<input type="checkbox"/> Developmental Stage for Athletic Placement Process ONLY			
Grades 7 & 8 to play at high school level OR Grades 9-12 to play middle school level sports			
Student is at Tanner Stage: <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V			
<input type="checkbox"/> Accommodations: Use additional space below to explain			
<input type="checkbox"/> Brace*/Orthotic	<input type="checkbox"/> Colostomy Appliance*	<input type="checkbox"/> Hearing Aids	
<input type="checkbox"/> Insulin Pump/Insulin Sensor*	<input type="checkbox"/> Medical/Prosthetic Device*	<input type="checkbox"/> Pacemaker/Defibrillator*	
<input type="checkbox"/> Protective Equipment	<input type="checkbox"/> Sport Safety Goggles	<input type="checkbox"/> Other:	
*Check with athletic governing body if prior approval/form completion required for use of device at athletic competitions.			
Explain: _____			
MEDICATIONS			
<input type="checkbox"/> Order Form for Medication(s) Needed at School attached			
List medications taken at home:			
IMMUNIZATIONS			
<input type="checkbox"/> Record Attached <input type="checkbox"/> Reported in NYSIS Received Today: <input type="checkbox"/> Yes <input type="checkbox"/> No			
HEALTH CARE PROVIDER			
Medical Provider Signature:		Date:	
Provider Name: <i>(please print)</i>		Stamp:	
Provider Address:			
Phone:			
Fax:			
Please Return This Form To Your Child's School When Entirely Completed.			

NYSED Interval Health History for Athletics–Two Page Form

Both pages must be completed.

Student Name:		DOB:
School Name:		Age:
Grade (check): <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Level (check): <input type="checkbox"/> Modified <input type="checkbox"/> Fresh <input type="checkbox"/> JV <input type="checkbox"/> Varsity	
Sport:	Limitations: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of last health exam:	Date form completed:	

Health History To Be Completed By Parent/Guardian, Provide Details To Any Yes Answers On Back.

Any medications to be taken at practice and/or athletic event will require the proper paperwork, contact school with questions.

Has/Does your child:		
General Health Concerns	Yes	No
1. Ever been restricted by a doctor, physician assistant, or nurse practitioner from sports participation for any reason?		
2. Have an ongoing medical condition? <input type="checkbox"/> Asthma <input type="checkbox"/> Diabetes <input type="checkbox"/> Seizures <input type="checkbox"/> Sickle Cell trait or disease <input type="checkbox"/> Other		
3. Ever had surgery?		
4. Ever spent the night in a hospital?		
5. Been diagnosed with Mononucleosis within the last month?		
6. Have only one functioning kidney?		
7. Have a bleeding disorder?		
8. Have any problems with his/her hearing or wears hearing aid(s)?		
9. Have any problems with his/her vision or has vision in only one eye?		
10. Wear glasses or contacts?		
Allergies	Yes	No
11. Have a life threatening allergy? Check any that apply: <input type="checkbox"/> Food <input type="checkbox"/> Insect Bite <input type="checkbox"/> Latex <input type="checkbox"/> Medicine <input type="checkbox"/> Pollen <input type="checkbox"/> Other		
12. Carry an epinephrine auto-injector?		
Breathing (Respiratory) Health	Yes	No
13. Ever complained of getting more tired or short of breath than his/her friends during exercise?		
14. Wheeze or cough frequently during or after exercise?		
15. Ever been told by their health care provider they have asthma?		
16. Use or carry an inhaler or nebulizer?		

Has/Does your child:		
Concussion/ Head Injury History	Yes	No
17. Ever had a hit to the head that caused headache, dizziness, nausea, confusion, or been told he/she had a concussion?		
18. Have you ever had a head injury or concussion?		
19. Ever had headaches with exercise?		
20. Ever had any unexplained seizures?		
21. Currently receive treatment for a seizure disorder or epilepsy?		
Devices/Accommodations	Yes	No
22. Use a brace, orthotic, or other device?		
23. Have any special devices or prostheses (insulin pump, glucose sensor, ostomy bag, etc.)? If yes there may be need for another required form to be filled out.		
24. Wear protective eyewear, such as goggles or a face shield?		
Family History	Yes	No
25. Have any relative who's been diagnosed with a heart condition, such as a murmur, developed hypertrophic cardiomyopathy, Marfan Syndrome, Brugada Syndrome, right ventricular cardiomyopathy, long QT or short QT syndrome, or catecholaminergic polymorphic ventricular tachycardia?		
Females Only	Yes	No
26. Begun having her period?		
27. Age periods began:		
28. Have regular periods?		
29. Date of last menstrual period:		
Males Only	Yes	No
30. Have only one testicle?		
31. Have groin pain or a bulge or hernia in the groin?		

NYSED Interval Health History for Athletics – Page 2

Student Name:	
School Name:	DOB:

Has/Does your child:		
Heart Health	Yes	No
32. Ever passed out during or after exercise?		
33. Ever complained of light headedness or dizziness during or after exercise?		
34. Ever complained of chest pain, tightness or pressure during or after exercise?		
35. Ever complained of fluttering in their chest, skipped beats, or their heart racing, or does he/she have a pacemaker?		
36. Ever had a test by their medical provider for his/her heart (e.g. EKG, echocardiogram stress test)?		
37. Ever been told they have a heart condition or problem by a physician? If so, check all that apply: <input type="checkbox"/> Heart infection <input type="checkbox"/> Heart Murmur <input type="checkbox"/> High Blood Pressure <input type="checkbox"/> Low Blood Pressure <input type="checkbox"/> High Cholesterol <input type="checkbox"/> Kawasaki Disease <input type="checkbox"/> Other:		
Injury History	Yes	No
38. Ever been diagnosed with a stress fracture?		

Has/Does your child:		
Injury History <i>continued</i>	Yes	No
39. Ever been unable to move his/her arms and legs, or had tingling, numbness, or weakness after being hit or falling?		
40. Ever had an injury, pain, or swelling of joint that caused him/her to miss practice or a game?		
41. Have a bone, muscle, or joint injury that bothers him/her?		
42. Have joints become painful, swollen, warm, or red with use?		
Skin Health	Yes	No
43. Currently have any rashes, pressure sores, or other skin problems?		
44. Have had a herpes or MRSA skin infections?		
Stomach Health	Yes	No
45. Ever become ill while exercising in hot weather?		
46. Have a special diet or have to avoid certain foods?		
47. Have to worry about his/her weight?		
48. Have stomach problems?		
49. Have you ever had an eating disorder?		

Please explain fully any question you answered yes to in the space below. (Please print clearly and provide dates if known.)

Parent/Guardian Signature: _____ Date: _____

Parent Contact Information

Team Parent's Information



There are times when our Team Mom/Dad needs to contact you. (i.e.- helping with the concession stand, Senior Night, end of season banquet, etc.)

Please indicate below how you would like to be contacted.

Childs Name _____

Sport(s) _____

Parents/Guardian Names _____

Preferred method of contact.

- Email Address _____
- Cell Phone _____ Do you text? _____
- Work Phone _____

This information will be shared with your child's Team Mom/Dad.