PULASKI COUNTY SPECIAL SCHOOL DISTRICT

FEEDER PATTERN ATHLETIC DIRECTORS

Maumelle High          Kirk Horton          501-851-5350
Mills University Studies High Raymond Cooper  502-490-5700
Robinson High          Todd Eskola            501-868-2400
Sylvan Hills High      Denny Tipton            501-833-1100

ADMISSION PRICES

Admission to any Athletic Event in PCSSD is $5 per person.

STUDENT ATHLETIC ACTIVITY PASS PROGRAM

All PCSSD secondary schools will participate in a Student Athletic Activity Pass Program again this school year.
At the beginning of the school year, each secondary school is permitted to sell season passes to students for $10. This will serve as admission for all athletic contests where there is a fee to enter. This includes all PCSSD secondary schools. A student must be wearing their PCSSD Student Identification Card and the card is honored by that one student ONLY. Any student not wearing an ID will be charged even if he or she paid for a pass. A pass will admit a student to any PCSSD school athletic contest.
This program is designed to assist families with expense for athletic contests and to bring more students to games. The student ID requirement is to assist in discipline and monitoring attendance.
Each school is responsible for selling the Student Athletic Activity Pass to the student body at their convenience. This is totally optional for the students.

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.
ARKANSAS ACTIVITIES ASSOCIATION ELIGIBILITY REQUIREMENTS

Student athletes are subject to the eligibility requirements of the Arkansas Activities Association and Pulaski County Special School District. Please see your coach or the school Athletic Director if you have any questions.

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. The Students athletes are required to discuss with the coach during or before tryouts participating for another team or activity, in order to come to a mutual decision before the team is selected. 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 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.

A student may not participate in a non-school team during the school season, as per AAA rules.

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 meeting will be listed in the school calendar as well as notification by the coaches at least two weeks in advance. Parents are required to attend the pre - season meeting. If for some reason neither parent can attend the schedule 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.

MEDICAL PROCEDURES, 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 supplemental Student Accidental Insurance Plan that covers after-school sports accidents and injuries. 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. A new athletic physical must be completed each year.
The Athletic Physical Form will be filed at the school and uploaded to Dragonfly, 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.

In addition to a current Athletic Physical, Parents must fill out all other required forms (Participation Consent form, HIPPA, Media/Transcript release, and Helmet form-football only) BEFORE a student is allowed to participate.

CONSENT

I/we hereby give consent to my son/daughter to participate in the above listed interscholastic sports during the school year. I/we also give permission for Emergency Medical Treatment by the team physicians, 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 results 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 not 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 physicians, nurse, athletic trainer, athletic director, and coaches.

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 District. I also grant permission for my child to be interviewed by the school District and the media as it pertain to Pulaski County Special School District. Additionally I give my consent and approval for the above named student’s picture and name to be printed in my high school or PCSSD athletic program, publication, and/or social media.

TRANSCRIPT RELEASE

I grant permission for coaches, counselors, and administrators to send transcripts to colleges and/or universities upon request for the purpose of evaluation for possible scholarship opportunities.
☑ I have read, understand, and agree to all of the above information and requirements for my student to participate in athletics in the Pulaski County Special School District.

《Parent Signature & Date》