

Petaluma Junior High School

Athletic Clearance Packet

We hope that all students will consider playing a sport while here at PJHS. Every student is welcome to try out for the following sports:

FALL: Girls Basketball
WINTER: Girls Volleyball and Boys Basketball
SPRING: Co-ed Wrestling and Co-ed Track

In order to tryout for a sport your child must turn in each of the following (completed) to the main office before the first day of tryouts:

- 1) Athletic Department Rules and Regulations signed by both parent & student (page 2)
- 2) Student Insurance Coverage For Sports completed & signed (page 3)
- 3) Stamped & Signed Physician's Statement (page 3) OR an attached official signed Physician's Clearance for Sports
- 4) Parent Consent completed & signed (page 3)
- 5) Coach's Information Sheet (page 4)
- 6) \$50 Sports Donation (see below)

Once all of the forms are completed and turned into the office, the student will be given an athletic release form and a copy of the coach's information sheet to be given to their coach during tryouts.

ATHLETE EXPECTATIONS

Being a student-athlete is a privilege and athletes must understand that they are representing themselves, their team, their coaches and their school at all times and should serve as positive role models to other students. With this in mind, the expectations for our student-athletes include: responsibility, respect, sportsmanship, work ethic, and commitment.

ATHLETIC ELIGIBILITY

To be eligible to participate in athletics a **student must maintain a minimum grade point average of 2.00 with no "F's and no unsatisfactory "U" citizenship marks** for the previous grading period. Students who drop below a 2.00 during season will be placed on athletic probation; athletes on probation may not participate in any games and may not miss class to travel to away games until their grades are brought back up above a 2.00. Follow up grade checks will be used to determine eligibility; if at the follow up grade check the athlete is still below a 2.00 they will be removed from the team and ineligible for the remainder of that season.

SPORT DONATIONS

We are asking please for a **\$50 (per sport) donation** this year (checks can be made payable to PJHS). With the current budget crisis many schools are being forced to reduce/eliminate their sports programs. All of our athletic funding currently comes directly from these donations and fund raising. These donations are used to pay for officials/referees, uniforms/equipment, and transportation (buses) for track.

Petaluma Junior High School

Athletic Department Rules and Regulations

ACADEMIC ELIGIBILITY:

To be eligible to participate in athletics a **student must maintain a minimum grade point average of 2.00** with no “F”s and no unsatisfactory “U” citizenship marks for the previous grading period. Students who drop below a 2.00 during season will be placed on probation; athletes on probation may not participate in any games and may not miss class to travel to games until their grades are brought back up above a 2.00. Follow up grade checks will be used to determine eligibility; if at the follow up grade check the athlete is still below a 2.00 they will be removed from the team and ineligible for the remainder of that season.

ATTENDANCE AND CONDUCT ELIGIBILITY:

1. A student must attend school at least half of the day (with an excused absence) in order to practice or play that day. An occasional exception may be made if cleared by an administrator or athletic director in *advance of the absence*.
2. Conduct on and off PJHS campus will be of nature to bring credit and pride to our junior high and our team. A student athlete that commits any offense that results in a suspension from school or an In-House-Suspension (IHS) will not participate in practice or competition for the duration of the suspension or on the day of IHS. Students suspended for the use, intent to distribute/ sell or possession of any illegal substance, including alcohol and tobacco, will be expelled from the team. Any violations of the law outside of school will be handled on a case-by-case basis by the coach, administration, and athletic department.
3. Athletes will not practice or play that day if not participating in P.E. that day for any reason.
4. Regular and punctual attendance to all practices and games is expected of all athletes.
5. Athletes are expected to conduct themselves in an appropriate and respectful manner at all times. They will treat all other teams, schools, coaches, referees, and officials respectfully. Any offense of verbal or physical altercations during a game will result in disciplinary action. The student athlete will use all equipment appropriately and with respect. They will wear and treat their uniforms with respect. Student’s may be billed for any damage or loss incurred.
6. A student-athlete with repeated discipline referrals may lose his/ her eligibility. The coach, athletic director and/or administrator responsible for the student will review the circumstances and a decision will be based on the severity of the problem and the student’s discipline history.

We have read and understood the above criteria for athletic sports participation at PJHS

Student Name _____ **Grade** _____ **Gender** _____

Parent/Guardian Signature _____ **Date** _____

Student Signature _____ **Date** _____

Student Name _____ Grade _____ Gender _____

STUDENT INSURANCE COVERAGE FOR SPORTS

California State Law (E.C.3175-2) requires all students participating in an interscholastic athletic activity to carry a minimum amount of insurance. Students must have at least \$1,500 of insurance covering medical and hospital expenses resulting from accidental bodily injury.

A. SCHOOL INSURANCE (obtained through school and above minimum requirements).
(Check One; if answer to item A is "no" then complete item B.)

_____ Yes

_____ No

B. PERSONAL INSURANCE We have checked our insurance policy(s) listed below and affirm that it meets the above minimum requirements.

_____ Insurance Carrier

_____ Policy #

This certifies the above name student is covered by personal accident insurance in case of injury while participating in interscholastic athletics during the coming school year.

SPORTS TRYING OUT FOR DURING THE SCHOOL YEAR: (CIRCLE ONE OR MORE)

Girls Basketball

Girls Volleyball

Boys Basketball

Wrestling

Track

PHYSICIAN'S STATEMENT

I hereby certify that _____ was examined by me on _____,

and found physically fit to engage in sports. _____

Signature of Physician * *

*** * YOU MUST INCLUDE A DR. OFFICE STAMP ABOVE OR ATTACH AN OFFICIAL PHYSICIAN SPORTS CLERANCE FOR VERIFICATION**

If this child has any injury or pre-existing condition that should be watched please list below:

PARENT CONSENT

I hereby give my consent for the above named student to compete in sports, travel with the team and to go with a representative of the school on any trips. In case this student is injured, I give my permission for necessary medical attention to be rendered. A minimum insurance requirement for interscholastic sports participation is being carried.

Signature of Parent or Guardian

Date

Student Name _____ **Grade** _____ **Gender** _____

COACH'S INFORMATION SHEET

Please provide the information below in case of need:

Mother/Guardian Name _____ Home Phone _____

Mother/Guardian Work Phone _____ Mother/Guardian Cell Phone _____

Father/Guardian Name _____ Home Phone _____

Father/Guardian Work Phone _____ Father/Guardian Cell Phone _____

Health Insurance Carrier _____ Policy Number _____

Family Doctor _____ Medical Phone Number _____

Any known allergies/ medical conditions _____

Necessary medications must be accompanied by doctor and parent signature.

Emergency Contact #1 Name _____ Phone _____

Emergency Contact #2 Name _____ Phone _____

I understand that in case of injury the school will not be held responsible for doctor bills. I/We, the undersigned, parents of a minor, do hereby authorize the principal or designee as agent for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general supervision of any physician and surgeon licensed under the provisions of the Medicine Practice Act, whether such a diagnosis or treatment is rendered at the office of said physician or at said hospital.

It is understood that the authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable.

This authorization shall remain effective until the end of the school year unless sooner revoked in writing delivered to said agent(s).

Signature of Parent or Guardian

Date