

DARRINGTON MIDDLE / HIGH SCHOOLS

STUDENT- ATHLETICS &
ACTIVITIES

HANDBOOK



Darrington School District Athletic Director – Linn Brooks (360) 436-1140 email: lbrooks@dsd.k12.wa.us

A small school and community united to inspire student success

Welcome to Darrington Middle/High Schools Athletics and Activities. Please read the following information to assist you in preparing to participate in our co-curricular programs.

Introduction: The opportunity to participate in the athletic/activity programs at Darrington School District is a privilege available to all students. Participants are expected to conduct themselves at all times in a manner which reflects the high standards and mission of Darrington School District; promoting safe performance, commitment to excellence in health and conditioning, and fulfilling responsibilities as student leaders by setting positive examples for other students. Remember you are representing not only yourselves, but your family, team, and community.

ATHLETIC ELIGIBILITY: The required forms for athletic participation are:

Acknowledgment of Risk
Sport Specific Risk Statements
Acknowledgement of Athletic/Activities Handbook
Permission to Participate
Locator and Emergency Authorization Form
WIAA- Waiver of Accident Plan Coverage
Media Consent Form
Concussion Information Sheet
Student/Parent Acknowledgement Form
WIAA: Physical Examination Form

ACTIVITIES ELIGIBILITY:

Student Section: In order to be eligible to participate in athletics, a student must meet eligibility requirements established by the Washington Interscholastic Activities Association (WIAA):

1. Age:
Senior High: A student shall be under twenty (20) years of age on September 1 for the fall sports season, on December 1 for the winter sports season, and on March 1 for the spring sports season.

Middle School: A student must be under the age of fifteen (15) prior to June 1 of the previous school year.
2. Residence: A student must be attending the school in the District in which their parent(s)/guardian(s) reside.
3. Seasons Played: A student is limited to as many seasons of competition in a sport as there are years of school work offered in the school.
4. Physical Examination: A student who participates in interscholastic athletics must have passed a physical examination, which now is good for two years (24 months) as of June 1, 2004.
5. Practiced at least the minimum number of times as set by the WIAA prior to participating in any interscholastic sports contest.

Participation:

In order to participate in extra-curricular athletic activities, a student must have:

1. Purchased an ASB card (verified by DHS/DMS office)
2. Turned in all equipment from the previous sport (verified by coach)
3. Met all scholastic requirements (verified by DHS/DMS office)

Practice Recommendation: In an effort to maintain a fair and distraction-free practice environment, it is the recommendation of the school board, administration, and coaches that practice sessions be limited to the athletes and coaches involved in that sport. This recommendation applies primarily to practices held indoors.

Beginning a Sports Season: Conditioning is an important part of athletics. Student athletes should consider conditioning and training before the first day of practice. In order to meet at least the minimum number of days of practice required by the WIAA in which the student athlete must participate before becoming eligible to play in a game, student athletes should be prepared to begin practice the first day of practice. Student athletes who find themselves in a circumstance which prevents them from appearing at the first practice should notify the head coach prior to the first official day of practice.

General Requirements

1. To be eligible to participate in practice a student athlete must attend over half the school day, and any absence must be excused. If the student has a pre-arranged absence, they may still practice even if the absence exceeds a half-day. Excused absence forms must be submitted to both the school office and coach. ***To participate in contest/games students MUST be in school attendance ALL DAY!***
2. A student athlete must be academically eligible.
3. During the time that the student athlete is ineligible or is suspended from competition, he/she may participate in practices but may not participate in contests, nor travel on the team bus.
4. A student athlete suspended from school (classes) may not participate in practices or contests.
5. A student athlete who is academically ineligible may not travel with the team.
6. A student athlete who is prevented from being able to practice or compete due to an injury requiring medical attention needs to provide written permission from his or her doctor or medical provider stating that it is now safe to practice and compete again before being allowed to practice or compete again.
7. All athletes suspected of suffering a concussion or brain injury will be removed from practice or competition and not returned to play until cleared in writing by a licensed health care provider trained in the evaluation and management of concussions (Medical Doctors, Doctor of Osteopathy, Advanced Registered Nurse Practitioner, Physicians Assistants, and **Certified Athletic Trainers.**)

All such injuries must be reported to the Athletic Director, or his/her designated representative, by the athlete or coach as soon after the injury as possible.

8. In the event an athlete sustains an injury (sprain, laceration, bruise), serious enough to require a physician's examination and treatment, the athlete must obtain written permission from a physician and his/her parent/guardian before being allowed to resume practice/competition.

All such injuries must be reported to the Athletic Director, or his/her designated representative, by the athlete or coach as soon after the injury as possible.

9. During athletic contests players' uniforms are to be worn as specified by the coaches according to what is appropriate for that sport and that uniform. During practices students are to wear appropriate attire. While shirts and shorts do not have to adhere to the policies specified in the student dress code for school, a degree of modesty is expected and clothing shall not be

excessively revealing or worn inappropriately according to the guidelines established by the coaching staff.

Uniforms and Equipment - All issued equipment and uniforms remain the property of Darrington MS/HS and must be returned to the Head Coach at the conclusion of the season. The Head Coach will determine the collection times. As an athlete you are responsible for the care and return of all issued uniforms and equipment. **Failure to return uniforms or equipment will result in extracurricular ineligibility and a financial obligation for replacement of the outstanding items.**

Determining Eligibility – Each Friday the MS and High School Offices will prepare grade reports, which are then distributed to head coaches. The athletic director will prepare an official eligibility report on the first working day of the following week. It is the responsibility of the coach/activity supervisor to check the “academic advisement/eligibility” list weekly and to notify the student athlete on the list and the student athlete’s parent/guardian of his/her eligibility status – either “Warned or Ineligible.” All questions, concerns, clarifications, or changes about the eligibility status of a student-athlete **must be referred to the building principal.**

Maintaining Eligibility

To maintain eligibility a student athlete must be enrolled in a half-time or greater schedule, and be marked passing in each of their regularly scheduled classes:

- (a) If a student athlete is not meeting the above requirements during the week the grade check is issued, he/she is identified as “warned” for eligibility. The student athlete has the remainder of that week to remove any failing grades.
- (b) If the student athlete is still not meeting the above requirements, beginning the Sunday before the next grade check, the student athlete becomes “ineligible” and must be marked passing in each class to become eligible again. During the time that the student athlete is ineligible, athlete may participate in practices but may not participate in contests. Ineligible athletes may not suit up or sit on the bench/player area during events, and are not allowed to travel to away events with the team.
- (c) Students who meet all other academic, social, and behavioral standards, and who show continued progress in the failing course may be granted provisional eligibility under WIAA standards (WIAA Handbook 18.7.0), based on consultation with student, parent, and teacher, and solely at the joint discretion of the athletic director and building principal.

To be eligible at the start of each new semester, a student athlete must meet the eligibility requirements listed above. Student athletes who fail to do so are placed on suspension the following semester (note: per WIAA, effective Fall 2018, this rule is waived for incoming 9th graders during Fall Semester only).

- (a) The suspension period for high school students shall be from the end of the previous semester through the fourth Saturday in September in the fall, or the first five (5) weeks of the spring semester.
- (b) The suspension period for middle school students shall be from the end of the previous semester through the first three (3) weeks of the succeeding semester.
- (c) Suspended students are eligible on the Monday of the week following the end of the suspension period (three or more teaching days constitute a week).

Responsibilities of a Darrington Athlete

A great athletic tradition is not built overnight. It takes hard work by many people over many years. As a member of an interscholastic squad, you have inherited a wonderful tradition, a tradition you are challenged to uphold.

Our tradition has been to win with honor. We desire to win, but only with honor to our athletes, our school, and our community. Such a tradition is worthy of the best efforts of all concerned. Over many years our squads have achieved numerous league and tournament championships. Many individuals have set records and won all-conference and all-state honors.

It will not be easy to contribute to such a great athletic tradition. When you wear the school colors, we assume that you not only understand our traditions, but also are willing to assume the responsibilities that go with them.

Responsibilities to Yourself: The more important of these responsibilities is to broaden yourself and develop strength of character. You owe it to yourself to get the greatest possible good from your school experiences. Your studies, your participation in other extra-curricular activities as well as in sports, prepare you for life as an adult.

Responsibilities to Your School: Another responsibility you assume as a squad member is to your school. Darrington's athletic teams cannot maintain their position as having outstanding programs unless you do your best in whatever activity you wish to engage. By participating in athletics to the utmost of your ability, you are contributing to the reputation of your school.

You assume a leadership role when you are on an athletic squad. The student body and citizens of the community know you and will judge our school by your conduct and attitudes, both on and off the field. Because of this leadership role, you can contribute greatly to school spirit and community pride. Make Darrington proud of you and your community proud of your school by your faithful exemplification of these ideals.

Responsibilities to Others: As a squad member, you also bear a heavy responsibility to your home. You should never give your family anything of which to be ashamed. You must measure up to all of the training rules. You should practice and play to the best of your ability every day. Younger students are watching you. They will copy you in many ways. Set good examples for the young.

Training Rules and Responsibilities: A student athlete's performance is directly related to the individual's physical and mental well-being. In order to increase the opportunity for the individual's success, the following rules are to be followed.

1. Respect the rights and property of others.
2. As representative of the Darrington School District to your community, school, parents, team, and coaches, conduct yourself with behavior consistent with the district's high standards on and off the playing field.
3. Obey all school rules and policies.
4. Remember that attendance at practices and contests is mandatory unless excused in advance by the coach(es).
5. Remember that you will be held financially accountable for issued equipment which is lost or damaged through misuse.

6. Refrain from using profane, obscene, and vulgar language. Such language is not tolerated and violators are subject to punishment.
7. Do not use athletic fields or equipment without permission and/or unsafe ways – particularly before or after practice or events at times without supervision.

18.26.0 – Use of Illegal substances (from WIAA regulations) – School and WIAA rules and regulations are intended to discourage the use of alcohol, tobacco, legend drugs, controlled substances and paraphernalia and to encourage the use of school and community resources. School and community resources should be identified for students who have had a violation and seek help or who are referred for assessment.

See 18.26.1 on Alcohol and Tobacco and 18.26.2 on Legend Drugs and Controlled Substances
18.26.1 Alcohol and Tobacco – Each WIAA member school shall adopt reasonable rules and regulations pertaining to the use of alcohol or tobacco products that are specific to the middle or high school levels.

Do not use, possess, or deal in illegal substances such as alcohol or tobacco. Such activities are prohibited and violators are subject to the following discipline:

First offense: suspension from competition for 10 calendar days (or longer until at least one game occurs) from the time of the offense on the condition the athlete agrees to submit to a drug and alcohol assessment and comply with all recommendations from the assessment

Or

Suspension from competition is for 21 calendar days.

Second offense (the same school year): suspension from competition for an additional 21 calendar days (including another sport if the 21 days extends into the next sports season.)

Third offense (the same school year): suspension from all extracurricular activities.

18.26.2 Legend Drugs and Controlled Substances – Penalties for possession, use or sale of legend drugs (drugs obtained through prescription, RCW 69.41.020-050) and controlled substances (RCW 69.50) shall be as follows:

First Violation – A participant shall be immediately ineligible for interscholastic competition in the current interscholastic sports program for the remainder of the season. Ineligibility shall continue until the next sports season in which the participant wishes to participate unless the student accesses the assistance program outlined in 2 (below).

An athlete that is found to be in violation of WIAA Rule 18.26.2 (Legend drugs and controlled substances) shall have two options.

- A. The athlete will be ineligible for participation in contests for the remainder of that interscholastic sports season and must meet with the school eligibility boards in order to be eligible to compete in the next interscholastic sports season. The school eligibility board will make recommendation to the school principal. The school principal will have the final authority regarding the student's participation in further interscholastic sports programs.
- B. The athlete may choose to seek and receive help for a problem with use of legend drugs or controlled substances. Successful utilization of school and or community

assistance programs may allow him/her to have eligibility re-instated in that athletic season, pending recommendation by the school eligibility board and principal.

Second Violation – A participant who again violates any provision of RCW 69.41.020 through 69.41.050 or of RCW 69.50 shall be ineligible for interscholastic competition for a period of one (1) calendar year from the date of the second violation.

Third Violation – A participation who violates for a third time RCW 69.41.020 – 69.41.050 or of RCW 69.50 shall be permanently ineligible for interscholastic competition.

8. If you find yourself in a situation where alcoholic beverages or illegal drugs are being consumed, remove yourself from such a situation within five (5) minutes and inform your parents, coaches and the athletic director the next school day about the situation!
9. Register any prescriptive medicine or non-prescriptive oral or internal medicine with the school nurse and inform the coaching staff so they have knowledge of any required medications so that the coaching staff is aware and so that medications can be prepared and stored as needed.
10. Refrain from any kind of hazing or harassing activity toward other students or athletes. This includes refraining from any kind of harassing or intimidating activity in person or communicated by means by other means such as by computer internet, traditional mail, or text or voice phone message.

The principal, athletic director and coaching staff are responsible for all decisions relating to disciplinary action resulting from violations of school guidelines, training rules and/or responsibilities.

***Disciplinary action is not limited to what is specified in this handbook.
Each violation is reviewed individually for each person involved.***

A criminal conviction, e.g. a felony or misdemeanor, could also result in disciplinary action. Disciplinary action requiring severe punishment will be based upon factual knowledge. When this type of disciplinary action is necessary, the following steps will be taken:

1. The coach will record in writing an account of the incident, rule violated, and disciplinary action taken. A copy of all activities relating to the incident will be made for the principal, athletic director, student athlete involved, and the student athlete's parent/guardian.
2. The coach will review the incident and action taken with the athletic director. The athletic director will arrange for a conference, if requested by the parent/guardian, to review the action. The coach, student athlete, parent, athletic director, and principal may be involved in the conference.

The above process will take place within three school days of the incident unless there are extenuating circumstances. If the meeting cannot be held within three school days of the incident, all of the involved parties will be notified of the cause of delay and the time of the meeting.

Appeal Process: A student athlete and/or a parent/guardian may appeal a disciplinary action within three school days. The following process will be used:

1. Coach: Appeal to the coach involved. If a satisfactory resolution cannot be reached, then the student athlete and/or parent/guardian may, within three school days, appeal to the athletic director.
2. Athletic Director: If a satisfactory resolution cannot be reached, then the student athlete and/or parent/guardian may, within three school days, appeal to the principal.
3. Principal: If a satisfactory resolution cannot be reached, then the student athlete and/or parent/guardian may, within three school days, appeal to the superintendent.
4. Superintendent: If a satisfactory resolution cannot be reached, then the student athlete and/or parent/guardian may, within three school days, appeal to the school board.

Awards: To receive recognition in a sport, the student athlete must:

1. complete the season (a student athlete may receive an award if unable to complete a season for medical reasons at the discretion of the coach),
2. return or replace all equipment checked out, and
3. meet the requirements in each sport as outlined by the coach and as outlined in this handbook.

Letter Awards: To receive a varsity letter in a sport, the following criteria must be met:

Football: Play in a minimum of one-half the quarters in the varsity season

Volleyball: Play in one-half the matches (tournaments count as one match) per varsity season

Basketball: Play in one-half the quarters per varsity season

Baseball/Softball: Play in at least one-half the innings played in a varsity season

Wrestling: Wrestle in one-half of varsity matches during the season or qualify for state

ALL SPORTS – *it is recommended that all Athletes attend at least 15 hours of weight lifting and/or conditioning during the off season in preparation for the season (off season league, practices and summer camps all count).*

Special Note: All Letter Awards are also subject to coach's discretion.

PE Lockers/Security: P.E. Lockers are made available in the P.E. locker rooms to P.E. students for storage of their P.E. clothes, and storage of street clothes during class. Students are reminded annually and repeatedly that the locker rooms are not secure, and that valuables must be kept in LOCKED lockers or GIVEN TO TEACHERS OR COACHES to insure security and safety. Students are responsible for doing everything possible to keep their possessions or school equipment issued to them secure. Visiting teams use the locker rooms so it is necessary to keep PE or athletic uniforms/equipment locked in lockers. The school is not responsible for lost or stolen items.

Athletic Travel: Student athletes are to follow all rules and policies of the Darrington School District with regard to bus conduct. The following specific rules apply when traveling to or from an extra-curricular activity:

1. All student athletes will travel to and from extra-curricular activities in transportation provided by the school district. However, under unique circumstances, travel by private vehicle may be allowed if approved in writing by the principal, athletic director or coach prior to departure for the event. *(Permission is limited to only vehicles shown in advance to the school principal to be judged safe.)*
2. An athlete may ride home after an extra-curricular activity with an approved, licensed driver at least 21 years old, if the athlete gives both the head coach and bus driver a Release of

Student Form that has been signed by a parent or legal guardian in advance of the return trip. (Note: forms may be obtained from the office.) ***Student athletes will not be released to travel home with anyone not at least 21 years old, even if written permission is presented.*** The Release of Student Form must list each specific date the athlete wishes to travel back by private vehicle or a separate Release of Student Form is needed each time the student athlete is not riding home on the school district provided transportation. (Permission is limited to only vehicles shown in advance to the school principal to be judged safe.)

3. Conduct on the bus will abide by rules established by the State and the District and any additional rules established by the coach(es).
4. Students will remain with the group under the coaches' supervision at all times.
5. Students are expected to dress in good taste as outlined by the coach(es).

Safety Guidelines: The school strives to protect each student athlete from possible injury while the student athlete is engaged in school activities. The guidelines and/or practices identified below have been established for the activities listed in order to protect the student athlete and others from injury and/or illness. Participants and their parents should recognize that conditioning; nutrition, proper techniques, safety procedures, and well-fitting equipment are important aspects of the activity. Each participant is expected to follow the directions/standards of the coach.

If travel to and from off-campus facilities is necessary, student athletes will travel in accordance with the directions of the coach.

Guidelines for all sports and training:

1. Make certain that you wear all equipment that is issued by the coach. Advise the coach of any poorly fitting or defective equipment.
2. Advise the coach if you are ill or have any prolonged symptoms of illness.
3. Advise the coach if you have been injured.
4. Engage in warm-up activities prior to strenuous participation.
5. Be alert for any physical hazards in the locker room or in or around the participation area. Advise the coach of any hazard.
6. Be sure that any prescriptive medicine or non-prescriptive oral or internal medicine is provided and registered with the school nurse so that the coaching staff is aware and can be prepared and stored as needed.
7. In the event that an athlete learns that she is pregnant, she is to contact the Darrington secondary principal and/or Darrington athletic director in order to insure the safety of the mother and child and obtain medical clearance to participate/continue in the sport.

Quitting: On occasion, there might be times when a student athlete decides to quit participating in a school program. When contemplating quitting, the student is encouraged to talk to his/her coach and hopefully complete the season for the good of the team and students. While a student will not be prevented from participating in that same sport in later year(s) or from another school sport in a later season, coaches may keep this in mind as one of the factors when judging student leadership and performance in determining playing time and positions.

ATHLETIC CHECKLIST

Each student athlete must download a copy of this athletic handbook, read it in its entirety and sign all required forms assigned to the student athlete and parent/guardian.

A current **physical examination form** must be signed by the athlete and parents specifically clearing the student to participate in school athletic programs.

The **physical examination** form and **proof of insurance** must be on file with the school before a student athlete is eligible to participate in turnouts.

Further, the student athlete must have purchased an **Associated Student Body (ASB) card** through the school office.

Before a student athlete is eligible to participate in a school-sponsored interscholastic athletic activity, all of the forms must be signed and an ASB card must have been purchased, before any contests can be participated in.

****Be sure that all signatures are in place. Be sure that the waiver of insurance form (if used) is filled out. Please Note: a signature alone on the waiver form does not constitute proof of insurance.***

ACKNOWLEDGEMENT OF RISK

All physical activities can result in possible injuries. Students who participate in organized and approved high school athletics have less of a chance of being physically injured than students involved in activities that are not a part of the school athletic program. Elements that reduce the possibility of athletic injuries in school programs are: Improved facilities and protective equipment, governing rules and policies, safety rule requirements, conditioning programs, and experienced coaches and supervisors. Athletes can further reduce their chances of injury by obeying all safety rules, following proper procedures and instructions, reporting all physical problems and injuries to their coaches, and inspecting their own equipment daily.

I acknowledge that participating in athletic competition or cheer activities entails many risks of injury, even when played in an instructional environment. These risks of injury include, but are not limited to, death, serious neck and spinal injuries (which may result in complete or partial paralysis), brain damage, serious injury to virtually all internal organs, bones, joints, ligaments, muscles, tendons and other aspects of the body, general health, and well-being.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

BASEBALL/SOFTBALL SAFETY GUIDELINES

The Darrington School District strives to protect each student from possible injury while engaging in school activities. The guidelines and/or practices identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and wellfitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach and both the general safety guidelines and specific baseball/softball safety guidelines as listed in this athletic handbook. _____

The general safety guidelines and specific baseball/softball safety guidelines listed in this athletic handbook have been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the baseball/softball program. _____

I agree that neither the school district, nor the staff of the school district, nor the student organization of the school district shall in any way be held liable for any accident or injury in anyway I received on account of or while engaged in any athletic activity sponsored by the district. I further agree that neither the district nor any of their staff or student organizations shall be responsible for the payment of any bills rendered for my medical services as a result of such accidents or injuries. _____

After acknowledging you have read each of the safety guidelines, please initial each paragraph. Sign and date below to verify understanding.

Student-Athlete Name PRINTED

Student-Athlete Signature

Date

Parent or Legal Guardian PRINTED

Parent or Legal Guardian Signature

Date

BASKETBALL SAFETY GUIDELINES

The Darrington School District strives to protect each student from possible injury while engaging in school activities. The guidelines and/or practices identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and wellfitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach and both the general safety guidelines and specific basketball safety guidelines listed in this athletic handbook.

The general safety guidelines and specific basketball safety guidelines listed in this athletic handbook have been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the basketball program. _____

I agree that neither the school district, nor the staff of the school district, nor the student organization of the school district shall in any way be held liable for any accident or injury in any way received on account of or while engaged in any athletic activity sponsored by the district. I further agree that neither the district nor any of their staff or student organizations shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries. _____

After acknowledging you have read each of the safety guidelines, please initial each paragraph. Sign and date below to verify understanding.

_____	_____	_____
Student-Athlete Name PRINTED	Student-Athlete Signature	Date

_____	_____	_____
Parent or Legal Guardian PRINTED	Parent or Legal Guardian Signature	Date

CHEERLEADING SAFETY GUIDELINES

The Darrington School District strives to protect each student from possible injury while engaging in school activities. The guidelines and/or practices identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and wellfitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach and both the general safety guidelines and specific cheerleading safety guidelines listed in this athletic handbook. _____

Most cheerleading practice areas are constructed with extremely hard surfaces. Athletes who fall during participation risk potentially dangerous injury especially to knees, elbows or head. Injury may include damage to joints, broken bones, or serious head and eye injury. _____

The general safety guidelines and specific cheerleading safety guidelines listed in this athletic handbook have been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the cheerleader program. _____

I agree that neither the school district, nor the staff of the school district, nor the student organization of the school district shall in any way be held liable for any accident or injury in any way received on account of or while engaged in any athletic activity sponsored by the district. I further agree that neither the district nor any of their staff or student organizations shall be responsible for the payment of bills rendered for medical services as a result of such accidents or injuries. _____

After acknowledging you have read each of the safety guidelines, please initial each paragraph. Sign and date below to verify understanding.

_____	_____	_____
Student-Athlete Name PRINTED	Student-Athlete Signature	Date

_____	_____	_____
Parent or Legal Guardian PRINTED	Parent or Legal Guardian Signature	Date

FOOTBALL SAFETY GUIDELINES

The Darrington School District strives to protect each student from possible injury while engaging in school activities. The guidelines and/or practices identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and wellfitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach and both the general safety guidelines and specific football safety guidelines listed in this athletic handbook. _____

The general safety guidelines and specific football safety guidelines listed in this athletic handbook have been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the football program. _____

I am aware that tackle football is a highrisk sport and that practicing or competing in tackle football will be a dangerous activity involving **MANY RISKS OF INJURY**. I understand that the dangers and risks of practicing and competing in tackle football include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of my body, general health and wellbeing. I understand that the dangers and risks of practicing or competing in tackle football may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities and generally to enjoy life. _____

Because of the dangers of tackle football, I recognize the importance of following coaches' instructions regarding techniques, training and other team rules, etc., and to agree to obey such instructions. _____

I understand that tackle football is a **HIGHRISK SPORT** involving many **RISKS OF INJURY**, including but not limited to those risks outlined above. _____

In consideration of the Darrington School District permitting my child/ward to try out for the Darrington High School tackle football team and to engage in all activities related to the team, including, but not limited to, trying out, practicing or competing in, tackle football, I hereby assume all the risks normally associated with tackle football and agree that neither the School District, nor the student organization of the school district shall in any way be held liable for any accident or injury in anyway received on account of or while engaged in any athletic activity sponsored by the district. I further agree that neither the district nor any of their staff or student organizations shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries. _____

After acknowledging you have read each of the safety guidelines, please initial each paragraph. Sign and date below to verify understanding.

_____	_____	_____
Student-Athlete Name PRINTED	Student-Athlete Signature	Date

_____	_____	_____
Parent or Legal Guardian PRINTED	Parent or Legal Guardian Signature	Date

VOLLEYBALL SAFETY GUIDELINES

This school strives to protect each student from possible injury while engaging in school activities. The guidelines and/or practices identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and wellfitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach and both the general safety guidelines and specific volleyball safety guidelines listed in this athletic handbook. _____

The general safety guidelines and specific volleyball safety guidelines listed in this athletic handbook have been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the volleyball program. _____

I agree that neither the school district, nor the staff of the school district, nor the student organization of the school district shall in any way be held liable for any accident or injury in anyway received on account of or while engaged in any athletic activity sponsored by the district. I further agree that neither the district nor any of their staff or student organizations shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries. _____

After acknowledging you have read each of the safety guidelines, please initial each paragraph. Sign and date below to verify understanding.

_____	_____	_____
Student-Athlete Name PRINTED	Student-Athlete Signature	Date

_____	_____	_____
Parent or Legal Guardian PRINTED	Parent or Legal Guardian Signature	Date

WRESTLING SAFETY GUIDELINES

This school strives to protect each student from possible injury while engaging in school activities. The guidelines and/or practices identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and wellfitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach and both the general safety guidelines and specific wrestling safety guidelines listed in this athletic handbook. _____

The general safety guidelines and specific wrestling safety guidelines listed in this athletic handbook have been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the wrestling program. _____

I am aware that wrestling is a **HIGHRISK SPORT** and that practicing or competing in wrestling will be a dangerous activity involving **MANY RISKS OF INJURY**. I understand that the dangers and risks of practicing and competing in wrestling include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of the muscular skeletal system, and serious injury or impairment to other aspects of my body, general health and wellbeing. I understand that the dangers and risks of practicing or competing in wrestling may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities and generally to enjoy life. _____

Because of the dangers of wrestling, I recognize the importance of following coaches' instructions regarding techniques, training and other team rules, etc., and to agree to obey such instructions. _____

I have read the above warning and release and understand its terms. I understand that wrestling is a **HIGHRISK SPORT** involving many **RISKS OF INJURY**, including but not limited to those risks outlined above. _____

In consideration of the Darrington School District permitting my child/ward to try out for the Darrington High School or Darrington Middle School wrestling team and to engage in all activities related to the team, including, but not limited to, trying out, practicing or competing in wrestling, I hereby assume all the risks normally associated with wrestling and agree that neither the school district, nor the student organization of the school district shall in any way be held liable for any accident or injury in anyway received on account of or while engaged in any athletic activity sponsored by the district. I further agree that neither the district nor any of their staff or student organizations shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries. _____

After acknowledging you have read each of the safety guidelines, please initial each paragraph. Sign and date below to verify understanding.

Student-Athlete Name PRINTED

Student-Athlete Signature

Date

Parent or Legal Guardian PRINTED

Parent or Legal Guardian Signature

Date

WEIGHT ROOM SAFETY RULES

This school strives to protect each student from possible injury while engaging in school activities. The rules and/or practices identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and wellfitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach. _____

The general safety guidelines and specific weight lifting safety guidelines listed in this athletic handbook have been explained to us and we understand the list of rules and procedures. We also understand the necessity of using the proper techniques while participating in the weight training program. _____

I am aware that weight training is a HIGH RISK SPORT and that practicing or competing in weight training will be a dangerous activity involving MANY RISKS OF INJURY. I understand that the dangers and risks of practicing and competing in weight training include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of the muscular skeletal system, and serious injury or impairment to other aspects of my body, general health and wellbeing. I understand that the dangers and risks of practicing or competing in weight training may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities and generally to enjoy life. _____

Because of the dangers of weight training, I recognize the importance of following coaches' instructions regarding techniques, training and other team rules, etc., and to agree to obey such instructions. _____

I agree that neither the school district, nor the staff of the school district, nor the student organization of the school district shall in any way be held liable for any accident or injury in anyway received on account of or while engaged in any athletic activity sponsored by the district. I further agree that neither the district nor any of their staff or student organizations shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries. _____

After acknowledging you have read each of the safety guidelines, please initial each paragraph. Sign and date below to verify understanding.

_____	_____	_____
Student-Athlete Name PRINTED	Student-Athlete Signature	Date

_____	_____	_____
Parent or Legal Guardian PRINTED	Parent or Legal Guardian Signature	Date

ACKNOWLEDGMENT OF THE DARRINGTON STUDENT- ATHLETIC HANDBOOK AND OF THE GENERAL ATHLETIC PROCEDURES

I have read the Darrington High School Student Athletic Handbook. I understand these rules and regulations and the possible penalties. I agree to abide by these rules and regulations during each sports season that I participate in. I commit myself to become the best team player and person I can be during the sports season(s) in which I participate. I will take pride in my team, my school, and most importantly, myself.

Student Athlete - I understand the safety rules and procedures. I also understand the necessity of using the proper techniques while participating in the school's athletic programs.

Student-Athlete Name PRINTED	Student-Athlete Signature	Date
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Parent/Guardian - I have read the Darrington High School Student Athletic/Activities Handbook. I understand these rules and regulations and the possible penalties. I will attempt to help ensure that my son/daughter will uphold these rules and regulations during the sports season(s) in which he/she participates.

Parent or Legal Guardian PRINTED	Parent or Legal Guardian Signature	Date
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PERMISSION TO PARTICIPATE FORM

Because of the dangers of athletics, I am aware that athletics are considered HIGH RISK and that practicing or competing in athletics may be dangerous and does involve MANY RISKS OF INJURY. I understand that the dangers and risks of practicing and competing in athletics include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system, and serious injury or impairment to other aspects of my body, general health and well-being. I understand that the dangers and risks of practicing or competing in athletics may result not only in serious injury, but also in serious impairment of my future abilities to earn a living, to engage in other business, social and/or recreational activities and generally enjoy life.

I recognize the importance of following coaches' instructions regarding techniques, training, and other team rules, etc., and agree to obey such instructions.

We, student athlete and parent/guardian, have read the above warning and realize and understand its terms. I understand that athletics are considered HIGH RISK and involve MANY RISKS OF INJURY, including but not limited to those risks outlined above.

In consideration of the District's permitting my child/ward to tryout for athletics and to engage in all activities related to the team, including, but not limited to, trying out, practicing, and competing in athletics, we hereby assume all the risks normally associated with athletics. I also agree that neither the District nor any of their staff or student organizations shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries.

_____	_____	_____
Student-Athlete Name PRINTED	Student-Athlete Signature	Date

_____	_____	_____
Parent or Legal Guardian PRINTED	Parent or Legal Guardian Signature	Date

LOCATOR AND EMERGENCY AUTHORIZATION CARD

The following information is requested to assist in the evaluation and treatment of your child.

Full Name of Child _____
Last First Middle

Age _____ Date of Birth _____ Phone # _____

Physician's Name _____ Phone # _____

Dentist Name _____ Phone # _____

Work Phone Number (Mother's) _____ (Father's) _____

Employer (Mother's) _____ (Father's) _____

Allergies: _____ Previous injuries: _____

Chronic Illnesses: _____ Previous concussions: Yes or No

Regular Medicines: _____

Type of Insurance: _____ Policy # _____

Name of Insured Person: _____

If the parent/guardian and/or authorized physician cannot be reached at the time of an emergency and if immediate observation or treatment is urgent in the judgment of school authorities, I authorize and direct the school authorities to send the student to the hospital or doctor most easily accessible and for such doctor to render such observation and treatment as is immediately necessary.

This authorization shall remain effective until June 30, 20____, unless sooner revoked in writing by the undersigned.

INSURANCE: I assume financial responsibility for medical expenses that may arise out of my child/ward's participation through a private medical insurer, state medical coverage, or the school accident coverage plan.

RIDE FORM: I hereby give my permission for my child/ward to travel to/from athletic events or activities in transportation arranged by school officials or other authorized personnel.

Signature of Parent/Guardian

Date

Address

Home Phone #

If you cannot be reached in case of an emergency, list below a contact person and a telephone number:

Contact Person

Phone Number

FOR SCHOOL USE ONLY

Completed form received (date) _____ by _____

Duplicate copy distributed to _____

On (date) _____

Insurance coverage by parents YES NO UNKNOWN

WASHINGTON INTERSCHOLASTIC ACTIVITIES ASSOCIATION REQUEST FOR WAIVER OF SCHOOL ACCIDENT PLAN COVERAGE

Date _____

Dear Principal:

I understand that my son/daughter cannot participate in boys/ or girls' after school athletics unless he/she is covered by the school accident coverage plan or our family plan which meets minimum coverage provisions. Our son/daughter is covered by accident insurance:

Option 1: _____ has insurance coverage with the school (*name of son/daughter*)
accident coverage plan.

Verification by the DHS/DMS office: _____
(*DHS/DMS office personnel signature*) (Date)

Option 2: _____ has insurance coverage with our family plan.
(*name of son/daughter*)

Name of Insurance Company _____ Policy No. _____

My son/daughter is covered by the insurance listed above. I will continue to keep it in force throughout the sports season: therefore, I do not wish to enroll my son/daughter,
_____ in the school Accident Coverage Plan.
(*name of son/daughter*)

The Principal is authorized to contact the Company names above to verify coverage limitations.

*As required by law, I verify and attest that accident coverage is provided by our policy and I accept full responsibility for the cost of treatment for any injury which he/she may suffer while taking part in the program. Please permit him/her to take part in athletics and Sports Days. **(Sign, date, and submit to district athletic director.)**

Date: _____ Parent Signature: _____

Please do not write or mark below – for DSD use:

Request approved (date) _____

Request denied (date) _____

Reason(s) _____

(*Principal's or principal's designee, e.g. athletic director signature*) (Date)

ACADEMIC ELIGIBILITY STANDARDS CONTRACT

For non-traditional high school students (running start, skills center, home school etc...)

I, _____
(Student Name)

understand, that it is my responsibility to provide official documentation to the Athletic Department of my academic progress. Grading periods are mid-quarter, quarter, and semester. Furthermore, I must notify the Athletic Department immediately if my academic program changes in any way.

Students Signature

Date

Parents/Guardians Signature

Date

MEDIA CONSENT FORM

I give permission for my child to photographed, videotaped, or interviewed and for his or her name and photo to be published in any media outlet including newspaper, TV, or electronic venues (which includes posting on the internet) and to have his or her name or photo printed in team rosters and programs.

Parent/Guardian Signature

Date

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

- Amnesia
- “Don’t feel right”
- Fatigue or low energy
- Sadness
- Nervousness or anxiety
- Irritability
- More emotional
- Confusion
- Concentration or memory problems (forgetting game plays)
- Repeating the same question/comment

- Loses consciousness

Adapted from the CDC and the 3rd International Conference on Concussion in Sport
Document created 6/15/2009

Darrington School District Concussion Information Sheet

What can happen if my child keeps on playing with a concussion or returns to soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete's safety.

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new "Zackery Lystedt Law" in Washington now requires the consistent and uniform implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

"a youth athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at the time"

And

"...may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from the health care provider."

You should also inform your child's coach if you think that your child may have a concussion. Remember its better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:
<http://www.cdc.gov/concussioninyouthsports/>

Student-Athlete Name PRINTED

Student-Athlete Signature

Date

Parent or Legal Guardian PRINTED

Parent or Legal Guardian Signature

Date

Adapted from the CDC and the 3rd International Conference on Concussion in Sport Document
created 6/15/2009

Darrington School District

Student/Parent Concussion and Sudden Cardiac Arrest Awareness Form

The Darrington School District believes participation in athletics improves physical fitness, coordination, self-discipline, and gives students valuable opportunities to learn important social and life skills.

With this in mind it is important that we do as much as possible to create and maintain an enjoyable and safe environment. As a parent/guardian or student you play a vital role in protecting participants and helping them get the best from sport.

Player and parental education in this area is crucial which is the reason for the Concussion Management and Sudden Cardiac Arrest Awareness pamphlet you received. Refer to it regularly.

This form must be signed annually by the parent/guardian and student prior to participation in Darrington School District athletics at the Middle and High School. If you have questions regarding any of the information provided in the pamphlet, please contact the athletic director at your school, Rachel Quarterman.

I HAVE RECEIVED, READ AND UNDERSTAND THE INFORMATION PRESENTED IN THE CONCUSSION RECOGNITION AND SUDDEN CARDIAC ARREST AWARENESS PAMPHLETS.

Student Name (Printed)

Student Name (Signed)

Date

Parent Name (Printed)

Parent Name (Signed)

Date

