

SAN DIEGUITO UNION HIGH SCHOOL DISTRICT ATHLETIC PACKET

In order to be eligible to participate on a sports team, you must first have the following items turned into the Athletic Director's office. All forms must be filled out completely and turned in prior to the beginning of the sports season. Failure to complete any of these forms will make you ineligible for an Athletic Clearance Card.

This packet should only be completed ONCE for each school year. Check your school's website for specific sport tryout dates and additional information.

- | | |
|--|--|
| <input type="checkbox"/> Emergency Release Form | <input type="checkbox"/> Handbook / Code of Conduct / Hazing Form |
| <input type="checkbox"/> Participation Form | <input type="checkbox"/> Transportation Guidelines Form |
| <input type="checkbox"/> Sports Physical Form (2-sided) | <input type="checkbox"/> SDUHSD Release of Liability |
| <input type="checkbox"/> Concussion Form | <input type="checkbox"/> Steroid Use Policy |
| <input type="checkbox"/> Proof of Medical Insurance Coverage (<u>photo copy of insurance card, front and back</u>) | <input type="checkbox"/> Pre-Enrollment Contact Form (if applicable) |
| <input type="checkbox"/> CIF Code of Ethics | <input type="checkbox"/> Player/Parent Handbook Signature Page |
| | <input type="checkbox"/> PE Credit Form: 10-12 only / Optional |
|
<input type="checkbox"/> GPA (<u>photo copy of most recent report card</u>) | |

Emergency Release Form: This form is the ONLY form you need to fill out every time you try out for a team.

Participation Form: This 2-sided form must be accurately filled out and must have BOTH athlete and parent signatures.

Sports Physical Form: A physical is required before participation in sports is permitted. It must be obtained after June 1st as per CIF to cover the following academic year. This form must be signed and dated with a full clearance by a licensed M.D. or D.O. in order for students to qualify for participation in school team sports. The school provided form must be used by your physician; no other form will be accepted.

Concussion Form: The athlete and parent must sign this form.

Proof of Medical Insurance: You must provide a photo copy of your medical insurance coverage (card).

CIF Code of Ethics: The athlete and parent must sign this form. It should be turned in with the athletic packet.

Handbook / Code of Conduct / Hazing Form: The athlete and parent must sign this form.

Athletic Transportation: Athletic transportation is provided by the district. The athletic transportation contribution for 2014-2015 will be part of the program donation through the Foundation, not a separate donation (do not submit a check with your completed athletic packet).

SDUHSD Release of Liability Form: The athlete and parent must sign this form.

Steroid Use Policy: The athlete and parent must sign this form.

Pre-Enrollment Contact – Declaration Form: Any and all pre-enrollment contact of any kind with a student athlete and coach during their seventh and eighth grade year must be disclosed by the student, parent(s), legal guardian(s), and or caregiver(s).

Grade Point Average: SDUHSD requires all students to turn in a photo copy of his/her up-to-date GPA when starting a new sport(s) season. **GPA:** You must have a 2.0 GPA in order to be eligible for a team. **All student(s) must include a copy of their last report card in this packet.**

Clearance Cards: Once all the above requirements are met, the student-athlete will receive clearance notification through the Athletic Office; check your site's website for specific dates and times.

Equipment: Students who make the team will be issued equipment. If the equipment is lost, stolen or not returned at the end of the season, a fee will be charged for repairs to, or replacement of, the equipment. Failure to return or pay for lost, stolen or repairs to equipment will affect the student's eligibility in other sports and graduation.

Mandatory Player / Parent Meetings

All San Dieguito Union High School District student-athletes and their parents/guardians are required by the district to attend their school site's preseason orientation meeting. The student athlete will not be able to participate in their first contest until the student athlete and one parent/guardian has attended the meeting.

Athletic Eligibility Form

San Dieguito Union High School District

FALL SPORTS (Aug.-Nov.) WINTER SPORTS (Nov.-Feb.) SPRING SPORTS (March-May)

Cross Country
Girls Field Hockey
Girls Golf
Girls Tennis
Girls Volleyball
Boys Waterpolo
Football (LCC / TP only)
Cheer

Girls Basketball
Boys Basketball
Girls Soccer
Boys Soccer
Girls Waterpolo
Wrestling

Baseball
Boys Golf
Boys Lacrosse
Girls Lacrosse
Girls Softball
Swim and Dive
Boys Tennis
Track
Boys Volleyball
Gymnastics

Athletic Eligibility Info for Entering Ninth Grade Students

1. You must have at least a 2.0 grade point average from your last semester in order to be eligible to tryout. Please attach a copy of your end of the year June report card to your packet. You must include a copy of your summer school report card if it helps raise your GPA to 2.0.
2. If you make a team that requires you to leave from a class early, "Early Releases" are emailed to staff and faculty the morning of an early release game. Please let your teacher know as you enter that class that you would like to leave early so they can plan ahead.
3. You must have medical insurance coverage and be able to prove it. The school has paper work available for Pacific Educators, Inc. for those of you who are not insured or would like extra insurance. The forms are available in the Athletics Office.
4. You must have a physical from your doctor in order to tryout. Physicals are good for ONE calendar year and must cover you through your entire sports season. Physicals must be signed by an MD, DO, or PA. Physicals from Nurse Practitioners will not be accepted. Please think ahead when making your doctor appointments. **If you do not have a current physical you will not be allowed to tryout. There are no exceptions.**

ATHLETIC EMERGENCY RELEASE FORM

(This form must be filled out for each individual sport)

Athletes Last Name	First Name	Initial	Grade
Address/City/Zip		Home Phone	D.O.B

Emergency Information

Emergency Contact	Relationship	Phone #
Father's Name	Mother's Name	
Cell #	Home #	Cell #
Work #	Other #	Work #
Sport	Please be aware you will be asked to complete this 3 part emergency form again if you play a 2nd or 3rd sport.	
Coach	Level	

Medical / Insurance Information

Family Physician	Phone Number
<u>Yes</u> <u>No</u> <u>Don't Know</u>	
<ol style="list-style-type: none">1. Has anyone in the athlete's family died suddenly before the age of 50 yrs.? (mom/dad/siblings, etc.)2. Has the athlete ever passed out during exercise or stopped exercising because of dizziness?3. Does the athlete have asthma (wheezing), hay fever or coughing spells after exercise?4. Has the athlete ever broken a bone, had to wear a cast or had an injury to any joint?5. Does the athlete have a history of a concussion (getting knocked out)?6. Has the athlete ever suffered a heat related illness (heat stroke)?7. Does the athlete have anything he/she wants to discuss with the physician?8. Does the athlete have a chronic illness or see a physician regularly for any particular problem?9. Does the athlete take any medication?10. Is the athlete allergic to any medications or to bee stings?11. Does the athlete have only one of any paired organ (eyes/ears/kidneys/testicles/ovaries, etc.)?12. Does the athlete have any problems with vision/eyes?13. Does the athlete habitually use drugs/alcohol/cigarettes?	
<u>Explain any Yes answers</u>	
Insurance Co.	Policy #
Policy Holder Name	Is this an HMO? Yes No

Parent's Statement

The above named student has my permission to participate in inter-scholastic sports and to travel with the team to events using transportation that qualifies under the school's regulations.

In case of injury, I give my consent for my child to have initial treatment by a hospital physician, or other medical personnel which is deemed necessary. This permission includes admission to the hospital and emergency surgery.

Parent/Guardian Signature _____ Date _____

Return all forms to the Athletic Secretary

Revised 6/13

Copies to: Athletic Trainer & Coach

ATHLETE'S AGREEMENT

I understand that:

- A. LCC / TP - I must be enrolled in at least four (4) classes.
CCA / SDA - I must be enrolled in at least three (3) classes.
- B. LCC / TP - I must be passing at least four (4) subjects and carry at least a 2.0 GPA in order to participate in any athletic program.
CCA / SDA - I must be passing at least four (3) subjects and carry at least a 2.0 GPA in order to participate in any athletic program.
- C. LCC / TP - I must attend at least two (2) periods of classes on the school day in which I have practice or contests.
CCA / SDA - I must attend at least three (3) periods of classes on the school day in which I have practice or contests.
- D. I must read, sign and turn in the Athletic Emergency Release Form for every sport for which I try out for.
- E. I must turn in a current physical. I am aware that physicals are good for one calendar year.
- F. I must turn in a photo copy of my insurance card proving that I have medical insurance.
- G. The use or possession of alcohol, tobacco (chewing or smoking), or drugs during practice or the playing season will result in being suspended from athletic participation.
- H. I am aware that serious catastrophic injury can result from any athletic participation. A handicapping injury or death can occur even under optimum conditions (equipment, coaching techniques, playing surfaces).
- I. The Varsity letter is a symbol of our district's athletics and remains the property of the school until my graduation; the wearing of the letter carries certain responsibilities. This *privilege* may be withdrawn at any time by school administration.
- J. As a representative of SDUHSD, my conduct and sportsmanship will always reflect the school philosophy. Behavior contrary to the school philosophy will result in my being banned from athletic participation.
- K. I am financially responsible for any gear issued to me. I realize that I will be billed for any item I am issued but do not return at the end of the season. I understand that by neglecting to return or pay for any items, I am putting my participation in the graduation ceremony in jeopardy.

I will take care of the following items with my coach once I have made the team:

- L. I must read, sign and turn in the SDUHSD extra-curricular Code of Conduct.
- M. I must read, sign and turn in the two page CIF Ethics in Sports.
- N. I must read, sign and turn in the Transportation Guidelines Form.

Athlete's Signature: _____ Date: _____

PARENT'S AGREEMENT

We, the parents/or legal guardian have read the athlete's agreement and understand item "J". We also understand and agree that my child is subject to all SDUHSD as well as all athletic, CIF, and extra-curricular Code of Conduct rules. We also understand and agree that we are financially responsible for any items lost, stolen or damaged by my child.

Parent/Guardian Signature: _____ Date _____

ATTENTION 10TH, 11TH, AND 12TH GRADE ATHLETES

In compliance with the San Diego CIF transfer rules, we need information regarding the following:

1. Did you attend San Dieguito Academy last year?

_____ YES

_____ NO

If you answered NO, please also answer the following:

2. Previous School: name, address, city, state, country

3. List the sports that you played at your previous school and the level – FR, JV, or Varsity

The San Diego CIF office requires that all transfer athletes complete a transfer clearance with the Athletic Director. **If you have transferred from another school, in grades 10 through 12, you will need to complete this process.** See the Athletic Secretary for additional information and paperwork.

Students who play before being notified of transfer clearance risk having the entire team forfeit games and/or the season.

Parent Signature _____ Date _____

Student Signature _____ Date _____

HEALTH HISTORY

(Note: This form is to be filled out by the patient and parent prior to seeing the physician. The physician should keep this form in the chart.)

Name: _____ Date of Birth: _____ Date of Exam: _____

Gender: Male Female Age: _____ Grade: _____ School: _____ Sport(s): _____

Medicines and Allergies: Please list all of the prescription and over-the-counter medicines and supplements (herbal and nutritional) that you are currently taking

Do you have any allergies? No Yes If yes, please identify specific allergy: Medicines Pollens Food Stinging Insects

Explain "Yes" answers below. Circle questions you don't know the answers to.

1	Has a doctor ever denied or restricted your participation in sports for any reason?	<input type="checkbox"/>	<input type="checkbox"/>
2	Do you have any ongoing medical conditions? If so, please identify: Asthma Anemia Diabetes Infections Other: _____	<input type="checkbox"/>	<input type="checkbox"/>
3	Have you ever spent the night in the hospital?	<input type="checkbox"/>	<input type="checkbox"/>
4	Have you ever had surgery?	<input type="checkbox"/>	<input type="checkbox"/>
5	Have you ever passed out or nearly passed out DURING or AFTER exercise?	<input type="checkbox"/>	<input type="checkbox"/>
6	Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?	<input type="checkbox"/>	<input type="checkbox"/>
7	Does your heart ever race or skip beats (irregular beats) during exercise?	<input type="checkbox"/>	<input type="checkbox"/>
8	Has a doctor ever told you that you have any heart problems? If so, check all that apply. High blood pressure A heart murmur High cholesterol A heart infection Kawasaki disease Other _____	<input type="checkbox"/>	<input type="checkbox"/>
9	Has a doctor ever ordered a test for your heart? (For example, ECG/EKG, echocardiogram)	<input type="checkbox"/>	<input type="checkbox"/>
10	Do you get lightheaded or feel more short of breath than expected during exercise?	<input type="checkbox"/>	<input type="checkbox"/>
11	Have you ever had an unexplained seizure?	<input type="checkbox"/>	<input type="checkbox"/>
12	Do you get more tired or short of breath more quickly than your friends during exercise?	<input type="checkbox"/>	<input type="checkbox"/>
13	Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 50 (including drowning, unexplained car accident, or sudden infant death syndrome)?	<input type="checkbox"/>	<input type="checkbox"/>
14	Does anyone in your family have hypertrophic cardiomyopathy, Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia?	<input type="checkbox"/>	<input type="checkbox"/>
15	Does anyone in your family have a heart problem, pacemaker, or implanted defibrillator?	<input type="checkbox"/>	<input type="checkbox"/>
16	Has anyone in your family had unexplained fainting, unexplained seizures, or near drowning?	<input type="checkbox"/>	<input type="checkbox"/>
17	Have you ever had an injury to a bone, muscle, ligament, or tendon that caused you to miss a practice or a game?	<input type="checkbox"/>	<input type="checkbox"/>
18	Have you ever had any broken or fractured bones or dislocated joints?	<input type="checkbox"/>	<input type="checkbox"/>
19	Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast, or crutches?	<input type="checkbox"/>	<input type="checkbox"/>
20	Have you ever had a stress fracture?	<input type="checkbox"/>	<input type="checkbox"/>
21	Have you ever been told that you have or have you had an x-ray for neck instability or atlantoaxial instability? (Down syndrome or dwarfism)	<input type="checkbox"/>	<input type="checkbox"/>
22	Do you regularly use a brace, orthotics, or other assistive device?	<input type="checkbox"/>	<input type="checkbox"/>
23	Do you have a bone, muscle, or joint injury that bothers you?	<input type="checkbox"/>	<input type="checkbox"/>
24	Do any of your joints become painful, swollen, feel warm, or look red?	<input type="checkbox"/>	<input type="checkbox"/>
25	Do you have any history of juvenile arthritis or connective tissue disease?	<input type="checkbox"/>	<input type="checkbox"/>

26	Do you cough, wheeze, or have difficulty breathing during or after exercise?	<input type="checkbox"/>	<input type="checkbox"/>
27	Have you ever used an inhaler or taken asthma medicine?	<input type="checkbox"/>	<input type="checkbox"/>
28	Is there anyone in your family who has asthma?	<input type="checkbox"/>	<input type="checkbox"/>
29	Were you born without or are you missing a kidney, an eye, a testicle (males), your spleen, or any other organ?	<input type="checkbox"/>	<input type="checkbox"/>
30	Do you have groin pain or a painful bulge or hernia in the groin area?	<input type="checkbox"/>	<input type="checkbox"/>
31	Have you had infectious mononucleosis (mono) within the last month?	<input type="checkbox"/>	<input type="checkbox"/>
32	Do you have any rashes, pressure sores, or other skin problems?	<input type="checkbox"/>	<input type="checkbox"/>
33	Have you had a herpes or MRSA skin infection?	<input type="checkbox"/>	<input type="checkbox"/>
34	Have you ever had a head injury or concussion?	<input type="checkbox"/>	<input type="checkbox"/>
35	Have you ever had a hit or blow to the head that caused confusion, prolonged headache, or memory problems?	<input type="checkbox"/>	<input type="checkbox"/>
36	Do you have a history of seizure disorder?	<input type="checkbox"/>	<input type="checkbox"/>
37	Do you have headaches with exercise?	<input type="checkbox"/>	<input type="checkbox"/>
38	Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling?	<input type="checkbox"/>	<input type="checkbox"/>
39	Have you ever been unable to move your arms or legs after being hit or falling?	<input type="checkbox"/>	<input type="checkbox"/>
40	Have you ever become ill while exercising in the heat?	<input type="checkbox"/>	<input type="checkbox"/>
41	Do you get frequent muscle cramps when exercising?	<input type="checkbox"/>	<input type="checkbox"/>
42	Do you or someone in your family have sickle cell trait or disease?	<input type="checkbox"/>	<input type="checkbox"/>
43	Have you had any problems with your eyes or vision?	<input type="checkbox"/>	<input type="checkbox"/>
44	Have you had any eye injuries?	<input type="checkbox"/>	<input type="checkbox"/>
45	Do you wear glasses or contact lenses?	<input type="checkbox"/>	<input type="checkbox"/>
46	Do you wear protective eyewear, such as goggles or a face shield?	<input type="checkbox"/>	<input type="checkbox"/>
47	Do you worry about your weight?	<input type="checkbox"/>	<input type="checkbox"/>
48	Are you trying to or has anyone recommended that you gain or lose weight?	<input type="checkbox"/>	<input type="checkbox"/>
49	Are you on a special diet or do you avoid certain types of foods?	<input type="checkbox"/>	<input type="checkbox"/>
50	Have you ever had an eating disorder?	<input type="checkbox"/>	<input type="checkbox"/>
51	Do you have any concerns that you would like to discuss with a doctor?	<input type="checkbox"/>	<input type="checkbox"/>
52	Have you ever had a menstrual period?	<input type="checkbox"/>	<input type="checkbox"/>
53	How old were you when you had your first menstrual period?		
54	How many periods have you had in the last 12 months?		

Explain "yes" answers here:

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

Signature of Athlete: _____ Signature of Parent/Guardian: _____ Date: _____

Preparticipation Physical Evaluation

PHYSICAL EXAMINATION

PHYSICIAN REMINDERS

1. Consider additional questions on more sensitive issues.

- Do you feel stressed out or under a lot of pressure?
- Do you ever feel sad, hopeless, depressed, or anxious?
- Do you feel safe at your home or residence?
- Have you ever tried cigarettes, chewing tobacco, snuff, or dip?
- During the past 30 days, did you use chewing tobacco, snuff, or dip?

• Do you drink alcohol or use any other drugs?

- Have you ever taken anabolic steroids or used any other performance supplement?
- Have you ever taken any supplements to help you gain or lose weight or improve your performance?
- Do you wear a seat belt, use a helmet, and use condoms?

2. Consider reviewing questions on cardiovascular symptoms (questions 5-14).

EXAMINATION Name: _____ Date of Birth: _____
 Male Female Height: _____ Weight: _____
 BP: _____ / _____ (_____/_____) Pulse: _____ Vision: R 20/_____, L 20/_____, Vision Corrected: Yes No

NEUROLOGIC	NORMAL	ABNORMAL FINDINGS
Appearance • Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, arm span > height, hyperlaxity, myopia, MVP, aortic insufficiency)		
Eyes/ears/nose/throat • Pupils equal • Hearing		
Lymph nodes		
Heart • Murmurs (auscultation standing, supine, +/- Valsalva) • Location of point of maximal impulse (PMI)		
Pulses • Simultaneous femoral and radial pulses		
Lungs		
Abdomen		
Genitourinary (males only)		
Skin • HSV, lesions suggestive of MRSA, tinea corporis		
Neurologic		
MUSCULOSKELETAL	NORMAL	ABNORMAL FINDINGS
Neck		
Back		
Shoulder/arm		
Elbow/forearm		
Wrist/hand/fingers		
Hip/thigh		
Knee		
Leg/ankle		
Foot/toes		
Functional • Duck-walk, single leg hop		

• Consider ECG, echocardiogram, and referral to cardiology for abnormal cardiac history or exam. • Consider GU exam if in private setting. Having third party present is recommended.
 • Consider cognitive evaluation or baseline neuropsychiatric testing if a history of significant concussion.

CLEARANCE

Cleared for all sports without restriction
 Cleared for all sports without restriction with recommendations for further evaluation or treatment for: _____

 Not cleared
 Pending further evaluation For any sports For certain sports: _____

Reason: _____
 Recommendations: _____

I have examined the above-named student and completed the preparticipation physical evaluation. The athlete does not present apparent clinical contraindications to practice and participate in the sport(s) as outlined above. A copy of the physical exam is on record in my office and can be made available to the school at the request of the parents. If conditions arise after the athlete has been cleared for participation, the physician may rescind the clearance until the problem is resolved and the potential consequences are completely explained to the athlete (and parents/guardians).

Name of physician (print/type): _____ Date: _____
 Address: _____ Phone: _____

Signature of physician: _____, MD, DO or PA

SAN DIEGUITO UNION HIGH 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 for a period of time after that concussion occurs, particularly if the athlete suffers another 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 athlete 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 CIF Bylaw 313 now requires implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

“A student-athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time and for the remainder of the day.”

and

“A student-athlete who has been removed 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 that health care provider”.

You should also inform your child's coach if you think that your child may have a concussion. Remember it's 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

SAN DIEGUITO UNION HIGH SCHOOL DISTRICT

Concussion Information Sheet

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.

Symptoms may include one or more of the following:

- | | |
|--|--|
| <ul style="list-style-type: none">• Headaches• “Pressure in head”• Nausea or vomiting• Neck pain• Balance problems or dizziness• Blurred, double, or fuzzy vision• Sensitivity to light or noise• Feeling sluggish or slowed down• Feeling foggy or groggy• Drowsiness• Change in sleep patterns | <ul style="list-style-type: none">• 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 |
|--|--|

Signs observed by teammates, parents and coaches include:

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays incoordination
- Answers questions slowly
- Slurred speech
- Shows behavior or personality changes
- Can’t recall events prior to hit
- Can’t recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness



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ETHICS IN SPORTS (ATHLETE-PARENT/GUARDIAN/CAREGIVER) – 2014-15
 (Revised 3/09)

I. POLICY STATEMENT

- It is the mission of the California Interscholastic Federation, San Diego Section (CIFSDS) to promote high standards of sportsmanlike and ethical behavior in and around athletic contests played under its sanction and, in life, in general. Citizenship, Integrity, and Fairness are embodied in that mission. CIF and CIFSDS contests must be safe, courteous, fair, controlled, and orderly for the benefit of all athletes, coaches, officials, and spectators, and behavior by all involved at all times should manifest the highest standards of conduct.
- It is the intent of the section membership that poor sportsmanship, unethical behavior, and violence, in any form, will not be tolerated in athletic contests or practices. In order to enforce this policy, the membership, through its Board of Managers, has established rules and regulations.
- Coaches assume the responsibility to teach and demand high standards of conduct of their athletes both on the field of play and in everyday life, in season and out of season.
- It is the school principal's responsibility to enforce all CIFSDS rules and regulations and to demand high standards of conduct from coaches, athletes, parents/guardians, and spectators. The principal shall demand strict adherence to all the CIF State and CIFSDS rules, regulations, and procedures.
- **Participation in interscholastic athletics and section playoffs is a privilege.**
- The CIFSDS Board of Managers requires that the following Code of Ethics be issued to and signed by each student-athlete, parent, coach, and officials' association. Penalties for failure to submit a signed Code of Ethics are:

1. Athlete	ineligibility for participation in CIF-San Diego Section athletics
2. Coach	Restricted from coaching in CIF-San Diego Section contests
3. Officials Association	Not approved to officiate in the CIF-San Diego Section
4. Parent	Prohibition/Removal from attendance at CIF or CIFSDS event
- **Failure to abide by the standards of behavior as agreed will result in a penalty up to and including disqualification to participate.**

II. CODE OF ETHICS FOR STUDENT-ATHLETE, PARENT/GUARDIAN/CAREGIVER, COACH, CONTEST OFFICIAL

- A. Comply with the six pillars and 16 Principles of the Pursuing Victory with Honor program (on reverse side).
- B. Be courteous at all times with school officials, opponents, game officials, and spectators.
- C. Exercise self-control.
- D. Know all rules of the contest, of CIF State, and the CIFSDS and agree to follow the rules.
- E. Show respect for self, players, officials, coaches, and spectators.
- F. Refrain from the use of foul and/or abusive language at all times.
- G. Respect the integrity and judgment of game officials.
- H. An athletic director, sports coach, school official or employee or booster club/sport group member may not provide any muscle-building nutritional supplements to student-athletes at any time. A school may only accept an advertisement, sponsor, or donation from a supplement manufacturer that offers only non-muscle building nutritional supplements. A school may not accept an advertisement sponsorship or donation from a distributor of a dietary supplement whose name appears on the label. Permissible non-muscle building nutritional supplements are identified according to the following classes: Carbohydrate/electrolyte drinks; energy bars, carbohydrate boosters, and vitamins and minerals. (Revised - Federated Council May 2007.)
- I. **Win with character; lose with dignity.**

Accept consequences of conduct deemed inappropriate or in violation of rules.

I have read, understand, and accept the Policy Statement, Code of Ethics, The Pillars and Principles of Pursuing Victory with Honor, and the Violations, Minimum Penalties, and Appeal Process (on attached page) of the CIF-San Diego Section **ETHICS IN SPORTS** Policy. I agree to abide by this policy while participating and/or being a spectator at CIFSDS athletic events regardless of contest site or jurisdiction.

 Signature – Athlete

 Printed Name

 Date

 Signature – Parent/Guardian/Caregiver

 Printed Name

 Date

PURSUING VICTORY WITH HONOR

SIX PILLARS OF CHARACTER

TRUSTWORTHINESS

RESPECT

RESPONSIBILITY

FAIRNESS

CARING

GOOD CITIZENSHIP

SIXTEEN PRINCIPLES OF PURSUING VICTORY WITH HONOR

1. The essential elements of character building and ethics in CIF sports are embodied in the concept of sportsmanship and six core principles: trustworthiness, respect, responsibility, fairness, caring, and good citizenship. The highest potential of sports is achieved when competition reflects these "six pillars of character."
2. It's the duty of School Boards, superintendents, school administrators, parents, and school sports leadership - including coaches, athletic administrators, program directors, and game officials - to promote sportsmanship and foster good character by teaching, enforcing, advocating, and modeling these "six pillars of character."
3. To promote sportsmanship and foster the development of good character, school sports programs must be conducted in a manner that enhances the academic, emotional, social, physical, and ethical development of student-athletes and teaches them positive life skills that will help them become personally successful and socially responsible.
4. Participation in school sports programs is a privilege, not a right. To earn that privilege, student-athletes must abide by the rules, and they must conduct themselves, on and off the field, as positive role models who exemplify good character.
5. School Boards, superintendents, school administrators, parents, and school sports leadership shall establish standards for participation by adopting and enforcing codes of conduct for coaches, athletes, parents, and spectators.
6. All participants in high school sports must consistently demonstrate and demand scrupulous integrity and observe and enforce the spirit as well as the letter of the rules.
7. The importance of character, ethics, and sportsmanship should be emphasized in all communications directed to student-athletes and their parents.
8. School Boards, superintendents, school administrators, parents, and school sports leadership must ensure that the first priority of their student-athletes is a serious commitment to getting an education and developing the academic skills and character to succeed.
9. School Boards, superintendents, principals, school administrators, and everyone involved at any level of governance in the CIF must maintain ultimate responsibility for the quality and integrity of CIF programs. Such individuals must assure that education and character development responsibilities are not compromised to achieve sports performance goals and that the academic, social, emotional, physical, and ethical well-being of student-athletes is always placed above desires and pressure to win.
10. All employees of member schools must be directly involved and committed to the academic success of student-athletes and the character-building goals of the school.
11. Everyone involved in competition including parents, spectators, associated student body leaders, and all auxiliary groups have a duty to honor the traditions of the sport and to treat other participants with respect. Coaches have a special responsibility to model respectful behavior and the duty to demand that their student-athletes refrain from disrespectful conduct including verbal abuse of opponents and officials, profane or belligerent trash-talking, taunting, and inappropriate celebrations.
12. School Boards, superintendents, and school administrators of CIF member schools must ensure that coaches, whether paid or voluntary, are competent to coach. Training or experience may determine minimal competence. These competencies include basic knowledge of: 1) The character building aspects of sports, including techniques and methods of teaching and reinforcing the core values comprising sportsmanship and good character. 2) The physical capabilities and limitations of the age group coached as well as first aid and CPR. 3) Coaching principles and the rules and strategies of the sport.
13. Because of the powerful potential of sports as a vehicle for positive personal growth, a broad spectrum of school sports experiences should be made available to all of our diverse communities.
14. To safeguard the health of athletes and the integrity of the sport, school sports programs must actively prohibit the use of alcohol, tobacco, drugs, and performance-enhancing substances, as well as demand compliance with all laws and regulations, including those related to gambling and the use of drugs.
15. Schools that offer athletic programs must safeguard the integrity of their programs. Commercial relationships should be continually monitored to ensure against inappropriate exploitation of the school's name or reputation. There should be no undue interference or influence of commercial interests. In addition, sports programs must be prudent, avoiding undue financial dependency on particular companies or sponsors.
16. The profession of coaching is a profession of teaching. In addition to teaching the mental and physical dimension of their sport, coaches, through words and example, must also strive to build the character of their athletes by teaching them to be trustworthy, respectful, responsible, fair, caring, and good citizens.

VIOLETIONS, MINIMUM PENALTIES, AND APPEAL PROCESS

(Applicable to players and coaches from time of departure for contest until time of return.)

ACT	MINIMUM PENALTIES*
1. Behavior resulting in ejection of athlete or coach from contest	<p><u>EJECTION POLICY:</u> Any coach, team attendant, or spectator ejected by a contest official from any contest for any reason, at any level, is suspended indefinitely from participation, practice, or attending (site and sound) any sports contest, until the first of the following occurs: the ejected person serves the tentative penalty recommended by the commissioner; or a meeting is held among the <u>school administration, coach, player, and custodial parent(s)/guardian(s)</u> with CIFSDS staff member(s) to discuss and impose an appropriate penalty which is served before participation resumes.</p> <p>Any player ejected by a contest official from any contest for any reason is suspended from participation in the next contest(s) until the tentative penalty recommended by the commissioner is served; or a meeting is held among the <u>school administration, coach, player, and custodial parent(s)/guardian(s)</u> with CIFSDS staff member(s) to discuss and impose an appropriate penalty which is served before participation resumes. Players are permitted to practice with the team and attend contests, but not in game uniform, during the period of suspension. (Approved June 3, 2008, Board of Managers). Meetings will be scheduled at a time to be announced. There is no appeal of the Commissioner's decision. Telephonic and electronic meetings are not permitted.</p> <p>Additionally, any person ejected (coach, player, spectator) is required to attend a CIFSDS Ethics In Sports Sportsmanship Meeting, which will be held at a time to be announced. Failure to attend the sportsmanship meeting will result in immediate suspension of athletic eligibility or attendance (site and sound) at contests or practices until such time as the ejected person attends a Sportsmanship Meeting. (Approved June 7, 2005, Board of Managers).</p>
2. Illegal participation in next contest by athlete ejected from previous contest.	<p>Ineligibility for remainder of season for athlete. A written appeal may be made by the individual or school to the commissioner.</p> <p>A coach, who permits participation by a player ejected from a previous contest, knowingly violates a CIF or San Diego Section rule, and penalty may include a sanction to the school, coach, or suspension of membership.</p>
3. Second ejection of athlete or coach from any contest during one season.	<p>Ineligibility of athlete for remainder of season or suspension of coach for remainder of season. A written appeal may be made by the school principal within two school days to the commissioner for reduction of penalty. Official to make report by the next school day to the commissioner</p>
4. When an athlete leaves the bench area or fielding position to begin a confrontation or leaves the bench area or fielding position to join an altercation.	<p>Ejection from the contest for those designated by the official, ineligibility for the next contest, probation for remainder of season. Those players involved are later identified, ineligible for next contest and probation for remainder of season. A written appeal may be made by the individual(s) or school to the commissioner. Official to make report by the next school day to the commissioner.</p> <p>A similar infraction of this act by the same athlete(s) during the same season will result in termination of the season for the athlete(s) concerned. A written appeal may be made by the school principal to the Commissioner.</p>
5. When more than two athletes leave the bench area or fielding position to begin a confrontation or leave the bench area or fielding position to join an altercation.	<p>Contest will be stopped by officials and coaches. Ejection from the contest for those athlete(s) designated by the officials. The team(s) that left the bench area must forfeit the contest, record a loss, and the team(s) and player(s) placed on probation for the remainder of the season. A written appeal may be made by the school(s) principal to the commissioner. A second infraction will result in cessation of the season for the team(s) and/or athlete(s). A written appeal may be made by the school(s) principal to the commissioner. Official to make report by the next school day to the commissioner.</p> <p>If the act occurs in the CIF-San Diego Finals, and both teams are charged with a forfeit, there will be no champion. A written appeal may be made by school(s) principal to the commissioner. Official to make report by the next school day to commissioner.</p>
6. Other acts committed by individuals or teams or acts committed at end of season	<p>Commissioner, as authorized by Green Book, to determine and implement penalties up to and including career suspension for individuals and following year penalties for teams.</p>
7. Use of an ineligible player in a contest.	<p>If a team uses an ineligible player in a contest(s), the contest(s) shall be forfeited. The number of forfeited contest(s) exceeds the maximum permitted in accordance with the CIFSDS Forfeit Policy (see Green Book) the team shall be excluded from CIFSDS playoffs.</p> <p>If an ineligible individual is permitted to participate in an individual sport, that individual is excluded from playoffs, and the school is subject to penalties for a willful violation of a rule.</p>

*Commissioner, as authorized by Green Book, may determine and implement additional penalties up to and including career suspension for individuals and following year penalties for teams.

San Dieguito Union High School District
2014-2015 School Year

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT FOR
INTERSCHOLASTIC ATHLETIC ACTIVITIES PARTICIPATION

This is a release of liability and assumption of risk agreement. Read it carefully and sign below. Completion of this release is a prerequisite to participation in any interscholastic athletic activity. This release essentially says the student named below is going to participate in an athletic activity which involves inherent risks to participants. If he/she is hurt, injured, or even dies, you (i.e., the student, parents and heirs) will not make a claim against or sue the San Dieguito Union High School District, its Board of Trustees, officers, employees, volunteers, and agents, or expect them to be responsible or pay for any damages.

NOW, THEREFORE LET IT BE KNOWN:

We, the undersigned, understand and acknowledge that _____(NAME OF STUDENT) has voluntarily chosen to participate in a school-sponsored athletic activity. We know and fully understand that any athletic activity or competitive sport, including, but not limited to, baseball, basketball, cross country, field hockey, football, golf, gymnastics, lacrosse, soccer, softball, swimming, tennis, track & field, volleyball, water polo, or wrestling, involves numerous risks, dangers, and hazards, both known and unknown, where serious accidents can occur, participants can sustain physical injuries, damage to their property, and even die. Regardless of whether the athletic activity involves physical contact or not, all athletic activities and sports have inherent risks of injury which are inseparable from the activity and cannot be entirely eliminated regardless of the care taken by players, coaches, trainers, or other staff. We acknowledge and willingly assume all risks and hazards of potential injury and death in this athletic activity, whether in practice, games, meets, or any other type of competition, including any transportation to or from any such event.

_____'s (NAME OF STUDENT) participation in this activity is purely voluntary and it is being done at his/her own risk

In consideration for San Dieguito Union High School District allowing the above-named student to participate in this athletic activity, we voluntarily agree to release, waive, discharge, and hold harmless San Dieguito Union High School District, its Board of Trustees, officers, employees, volunteers, and agents from any and all claims of liability arising out of their negligence, or any other act or omission which causes the student illness, injury, death and damages of any nature in any way connected with the student's participation in this activity. We also expressly agree to release and discharge San Dieguito Union High School District, its Board of Trustees, officers, employees, volunteers, and agents from any act or omission of negligence in rendering or failing to render any type of emergency or medical services.

As parent or legal guardian of the student/participant under 18 years of age, I have read and voluntarily agree that my son/daughter may participate in this athletic activity, and I sign this release on his/her behalf. In signing this document, I fully recognize and understand that if my son/daughter is hurt, dies, or his/her property is damaged, I am giving up the student's right and the rights of the parents and heirs to make a claim or file a lawsuit against San Dieguito Union High School District, its Board of Trustees, officers, employees, volunteers, and agents.

California Law provides as follows: "All persons making the field trip or excursion shall be deemed to have waived all claims against the district or the State of California for injury, accident, illness, or death, occurring during or by reason of the field trip or excursion. All adults taking out-of-state field trips or excursions and all parents or guardians of pupils taking out-of-state field trips or excursions, shall sign a statement waiving such claims." (Education Code Section 35330)

WE, THE UNDERSIGNED, HAVE READ THIS DOCUMENT. WE UNDERSTAND THAT IT IS A RELEASE OF ALL CLAIMS. WE FURTHER UNDERSTAND THAT WE ARE ASSUMING ALL RISKS INHERENT IN THIS ATHLETIC ACTIVITY. WE VOLUNTARILY SIGN OUR NAME AS EVIDENCE OF OUR ACCEPTANCE OF THE ABOVE PROVISIONS, PARTICIPATION IN THE ACTIVITY AND ANY FIELD TRIP OR EXCURSION ASSOCIATED WITH IT.

Student/Participant Signature

Date

Parent/Guardian Signature (if Student/Participant is under 18)

Date

ACKNOWLEDGEMENT OF SDUHSD ATHLETIC HANDBOOK

It is required that all athletes and their parents/guardians read the SDUHSD Athletic Handbook for Student Athletes, Parents and Supporters. You may download the Handbook from your school's website, click on Athletics and then on the Athletic Handbook link. By signing below, I agree to read the Athletic Handbook.

SDUHSD CODE OF CONDUCT 5131.1/AR-1

The San Dieguito Union High School District offers students an opportunity to participate in extracurricular activities and athletics. Student participation on an athletic team and in extracurricular activities is a privilege that is extended to every eligible student. With every privilege comes responsibility. It is the responsibility of every student to abide by the provisions of the District Discipline Guidelines as well as the Extracurricular Code of Conduct. An athlete who participates in athletics agrees to abide by the combined rules developed by CIF-San Diego Section, San Dieguito Union High School District, and specific sport rules and regulations.

DISTRICT DISCIPLINE GUIDELINES

Students involved in any of the following problem areas will face disciplinary action ranging from an individual conference to expulsion from school:

Problem Areas

**Cheating
Hate/Violence
Physical Assault
Arson
Smoking/Tobacco
Explosive Devices
Hazing
Misuse of Car on Campus
Knowingly Received Stolen Property**

**Fighting
Defiance of Authority
Disruptive Behavior
Weapons/Facsimiles
Theft/Breaking & Entering
Obscenity/Profanity/Vulgarity
Sexual Harassment/Assault
Forgery
Alcohol/Drugs/Paraphernalia & Look A Likes**

**Threats/Intimidation
Gambling
Tardiness/Unexcused Absences
Possession of Laser Pointer
Robbery/Extortion
Bus Referral/Misbehavior
Destruction of Property**

Students suspended from school for two (2) days will be ineligible from all extracurricular activities, including athletics (READI referrals, in lieu of suspension, apply). The term of the suspension shall be 30 calendar days. The 30-calendar-day suspension will go into effect on the first day of the 2-day school suspension. During this period, students are prohibited from participating in all extracurricular activities, athletics, team practices, team competition, athletic competition, school performances, rehearsals, etc. (students may participate in team try-outs). Violation of the San Dieguito Union High School District Discipline Guidelines may also result in the revoking of any awards for which the student might otherwise be eligible.

ACKNOWLEDGEMENT OF DISTRICT HAZING POLICY

Definition of Hazing: Hazing in any form including initiation which is degrading is strictly forbidden by California State Law. No student shall conspire to engage in hazing, participate in hazing or commit any act that causes or is likely to cause bodily danger, physical harm, personal degradation or disgrace resulting in physical or mental harm to any fellow student or other persons.

The District strives to maintain a healthy athletic program in which all students feel safe and welcome and can be proud of their school and athletic programs they represent. Hazing in any form is strictly prohibited. Violation of the law prohibiting hazing is a misdemeanor. Persons violating this policy shall be referred to their school principal and subjected to District Discipline Guidelines disciplinary action; including forfeiture of athletic eligibility, entitlements, and any awards/letters.

I understand that hazing of any kind is not allowed on this campus or in the athletic program. This includes mental, verbal and physical acts. I further understand that it is my duty to report any acts of hazing that I have knowledge of and/or see to a coach or administrator on campus.

By signing below I agree to read the SDUHSD Athletic Handbook. I agree to uphold the District Code of Conduct and District Hazing Policy and understand that any violation will result in my immediate suspension from athletics and further disciplinary action.

Student (print)

Student Signature

Date

Parent/Guardian (print)

Parent/Guardian Signature

Date

STEROIDS

Note: As added by SB 37 (Ch. 673, Statutes of 2005), Education Code 49033 requires the California Interscholastic Federation to adopt a bylaw, effective July 1, 2006, requiring any student participating in athletics and his/her parent/guardian to sign an agreement that the student will not use steroids and dietary supplements banned by the U.S. Anti-Doping Agency and the substance synephrine, unless the student has a written prescription from a licensed health care practitioner to treat a medical condition. The following agreement is based on a sample developed by the California Interscholastic Federation.

**AGREEMENT FOR STUDENT ATHLETE AND PARENT/GUARDIAN
REGARDING USE OF STEROIDS**

(print name of student athlete)

Directions: As a condition of membership in the California Interscholastic Federation (CIF) and in accordance with Education Code 49030, the Governing Board of the San Dieguito Union High School District has adopted Board Policy 5131.63 prohibiting the use and abuse of androgenic/anabolic steroids as specified below. CIF Bylaw 524 requires that all participating students and their parents/guardians sign this agreement.

By signing below, we agree that the student shall not use androgenic/anabolic steroids or any dietary supplement banned by the U.S. Anti-Doping Agency as well as the substance synephrine, without a written prescription from a licensed health care practitioner to treat a medical condition.

We recognize that under CIF Bylaw 200.D the student may be subject to penalties, including ineligibility for any CIF competition, if the student or his/her parent/guardian provides false or fraudulent information to the CIF.

We understand that the student's violation of the district's policy regarding steroids may result in discipline against him/her including, but not limited to, restriction from athletics or suspension or expulsion from school

Signature of student athlete

Date

Signature of parent/guardian

Date

(7/05) 3/06

San Dieguito Union High School District

Athletic Transportation & Donation Guidelines

June 2013

In order to promote safety and team camaraderie, all student athletes are strongly encouraged to ride district transportation to and from all competitions.

In the event the student athlete is unable to ride district provided transportation, the student athlete may ride with his or her parent/guardian, as long as the parent gives written permission to the coach in advance. Student athletes will not be permitted to ride to and from an athletic competition with any adult or student other than their own parent/guardian.

Student athletes who violate this policy may be suspended or removed from the team.

Providing school-sponsored transportation is very costly. Any losses in transportation are paid from the school's operating budget. In order to continue to provide this valuable service, we ask you to make a \$100 contribution (maximum \$200 per school year for multi season athletes).

Beginning the 2012/2013 school year, parents will write their transportation donation check to their High School Foundation. This will simplify the process, by allowing you, the parent to write one donation check to support the team budget AND transportation. You will receive a tax-deductible acknowledgement of your donation.

This is a minor change that will save district time and dollars. We appreciate your continued support for the Transportation Program.

School Name: _____

Date: _____

Student Name: _____

Grade: _____

Sport(s): _____

Student Signature

Parent Signature

**Please remember to attach a
photocopy of your health
insurance card and most
recent progress report/report
card.**

**Thank you,
SDA Athletics**

**San Dieguito Union High School District
Pre-Enrollment Contact - Declaration Form
CIF – Rule 510**

Any and all pre-enrollment contact of any kind with a student athlete during their seventh and eighth grade year must be disclosed by the student, parent(s), legal guardian(s), and or caregiver(s)

- Pre enrollment contacts must be disclosed to include dates and times contact was made
- Private lessons must be disclosed if they are with one of the athletic coaching staff members or athlete on the current or former team
- Coaches may not attend outside athletic events before the student athlete is officially enrolled in the school
- Persons associated with the school include but are not limited to current or former coaches, current or former athletes, parents of current or former student athletes, booster club members, alumni, spouses or relatives of coaches, teachers and other employees of the SDUHSD district.
- No communication is allowed to prospective student athletes until they become officially enrolled
- All transfer students need to consult with the athletic direct or once they become officially enrolled within the SDUHSD district school

Player's Name: _____

Parent's Name: _____

Address: _____

City, State, Zip Code: _____

Phone #: _____ Phone#: _____

Email Address: _____

School Attended 7th / 8th Grade: _____

Sport(s) you are trying out for: _____
(Fall) (Winter) (Spring)

Explanation of contact – sport, type of contact (camp, clinic, private lesson), date, time

Parent Signature: _____ Date: _____

Parent / Player Handbook Guidelines Agreement

I have read a copy of the *San Dieguito Union High School District Parent / Player Handbook*, and I agree to abide by the guidelines described therein. The Player / Parent Handbook can be found on the school's Athletic Website.

Sport: _____

Parent Name: _____

Parent Signature: _____

Player Name: _____

Player Signature: _____

San Dieguito Union High School District

P.E. Credit Contract - High School Athletics

ID#: _____ SCHOOL: _____ DATE: _____

Student Name _____ Grade _____ is requesting 5 credits of Physical Education credit for participation in the following school sponsored interscholastic athletic program:

Sport: _____ Season: _____ Coach Name: _____

- Available to students in grades 10 – 12 only.
- Student must have passed the California Physical Fitness Test in any high school academic year prior to the school year in which the PE Credit/Athletic credit will be used. **Pass Date:** _____
- A total of 5 credits may be earned each season. No more than ten (10) credits of physical education may be earned by participation in school sponsored interscholastic athletics. Twenty (20) credits of physical education are required for a SDUHSD diploma.
- Student must begin participation the first day of the season and successfully complete the season in order to receive credit. This must be verified by the Coach, Athletic Director, and Site Administrator.
- Any one of the items listed below will make the student *ineligible* to receive credit in this program.
 - A student who is absent at practice or games more than 10% of the time will not be eligible for credit.
 - A student who displays unsportsmanlike conduct will not be eligible for credit.
 - Any violation of the SDUHSD Athletic Code of Conduct will make the student ineligible for credit.
 - Students must be academically eligible for the *entire* season to be eligible for credit.
- Credit will be recorded as P (Pass). A-F letter grades not will be issued.
- A copy of this contract must be on file *before* the official CIF start date of the season in order to be eligible to receive credit.

(1) _____
Student's signature

(3) _____
Coach's Signature

(2) _____
Parent's signature

(4) _____
Athletic Director Signature

Upon successful completion of the season the coach will provide documentation to the Athletic Director. No credit will be issued without signatures of the Athletic Director and Site Administrator in the area below.

Athletic Director

School Site Administrator

NOTE: Students may earn a total of 10 credits (5 credits per season) for participation in a school sponsored CIF interscholastic athletic program carried on wholly or partially after regular school hours. Students enrolled in Independent Study PE or Team Sports students who participate in their sport as a regular PE class, e.g., Football PE are not eligible for this credit.

WARNING: The PE – Athletic credit you have requested as a graduation requirement for SDUHSD, will not be issued without successful completion of the school sponsored interscholastic athletic season you are participating in. Be sure to check with your counselor and evaluate your graduation status to be sure you have met the SDUHSD graduation requirements.

cc: Student/Parent
Coach
Counselor
Athletic Director