

WILSON CREEK SCHOOL DISTRICT SPORTS PACKET



CO-CURRICULAR CODE

2013-2014

Wilson Creek School District 167-202
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WILSON CREEK SCHOOL DISTRICT 167-202

CO-CURRICULAR ACTIVITY PHILOSOPHY

Wilson Creek School District is committed to a strong and diverse extra-curricular program for all of its students. We believe that an extra-curricular experience provides a valuable link in a student's overall growth and maturation process. Every effort is made to offer separate and equal programs for boys and girls. All programs will challenge participants to achieve success in a quality, caring and innovative environment.

Extra-curricular participants are encouraged to participate in the total school program and experience as wide a variety of activities as possible. Coaches are, therefore, discouraged from elongating any sport season by encouraging extra-curricular participants to work and compete in a specific sport rather than participate in another sport season.

Student safety in extra-curricular activities will be the top consideration throughout our program.

We view competition as an important part of a sound extra-curricular program. Competitive experiences will be balanced with participation, skill development and safety concerns.

Junior high programs will stress participation and skill development. A "no cut" policy will be used at this level unless team dimensions dictate that there are too many students turning out for the teams we can offer.

High school teams will stress skill development, competition, team attitude and success. Cutting is strongly discouraged unless team dimensions cannot accommodate the number of students turning out. Playing time at the varsity level will be as a result of the progression of the extra-curricular participant's skills and attitude and the needs of the team as determined by the coach.

Sportsmanship and fair play are stressed throughout our programs. It is our intent to hold our participants and coaches to the highest standards of conduct. In compliance with WIAA rule, sportsmanship violations that result in ejection from a contest will mean automatic suspension from play in the next scheduled contest at that level.

CO-CURRICULAR CODE OBJECTIVES

The extra-curricular program:

1. Is designed for all students who possess the skills necessary to make a team
2. Will contribute to:
 - a. Development of physical skills
 - b. Emotional maturity
 - c. Cooperation and self-discipline
3. Will stimulate the participants' interests in the overall educational program
4. Will provide separate and equal programs for boys and girls
5. Will develop a competitive spirit in an environment of participation, skill development and safety
6. Will emphasize sportsmanship by all participants
7. Will challenge the participant to achieve success in a quality, caring and innovative environment
8. Will enhance respect for others and promote self-worth

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CO-CURRICULAR CODE OBJECTIVES

SUPERVISION

The coach in charge of each activity will be responsible for the overall program and the supervision of individual participants. Students are not to use school facilities at any time unless appropriate supervision is present.

PARTICIPATION

Extra-curricular participation will be subject to the written policies set down by the coach and this extra-curricular code. These rules must be observed by the participant and will be enforced for the duration of the athletic season or activity.

Any coach's rule above and beyond the scope of this code need to be submitted to the athletic director/principal, and will be on file with same.

STUDENT ELIGIBILITY

Participation Requirements

1. Extra-curricular list requirements:
 - a. Physical exam
 - b. Parent permission
 - c. Liability waiver
 - d. Insurance
 - e. Medical emergency information
 - f. ASB card (prior to first content)

Once all requirements are met, students are placed on the list and are eligible.

Scholastic Requirements

To be eligible for extra-curricular participation, a participant must meet the following scholastic requirements:

1. They must pass all scheduled classes in the grading period immediately preceding that quarter/semester of participation.
2. They must have a 2.0 grade point average (GPA) from the previous grading period during the first week of eligibility in a new quarter. After the first week of a quarter the weekly eligibility list will be utilized to determine probation and eligibility. The exception to this eligibility will be a special education student who receives a grade point average of less than 2.0 in all the classes but is showing effort to his/her ability in these classes.

Note: No exceptions to the eligibility requirements are allowed. A student/athlete may appeal an eligibility issue to an eligibility team consisting of the superintendent/principal. This appeal must be approved by the athletic director before considered by the administrative team. Student/athlete will remain ineligible until after the appeal is decided.

Note: The record at the end of the grading period will be final except that incompletes can be made up during the first five weeks of the following quarter/semester.

Note: Previous school transcripts will be used to satisfy this requirement for transfer students.

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ATTENDANCE

1. Extra-curricular participants must be in attendance at all class periods to participate in practice, contests or any school-sponsored activity on that day. This would include dressing down for P.E. Tardies will be reviews on an individual basis by the athletic director. Exceptions to this requirement are as follows:
 - a. Curricular activities
 - b. Special written or phoned request of the parent/guardian, approved by the coach prior to the absence
 - c. Principal's permission involving emergency situations
 - d. Approved co-curricular events that the participants are involved in that continue after school are also grounds for an excused absence. However, if the event concludes prior to the end of practice, the participant is required to attend the remaining portion of practice.
 - e. All appointment in the legal or health profession. These absences will be excused only with a note documenting the appointment.
2. The penalty for unauthorized/unexcused missing of practice will be as follows:
 - a. Suspension from the next game played for the first offense
 - b. Suspension from the next two games for the second offense
 - c. Expulsion from the team for the season following the third offense and no letter award
3. Delay of interruption of practice days: Wilson Creek will adhere to WIAA policies concerning minimum practice days and interruption of minimum practice days.

PARTICIPANT RESTRICTIONS

1. Participants will not turn out for an activity until all previously issued equipment has been returned or otherwise accounted for.
2. Any high school or junior high school athlete may not turn out for a sport at Wilson Creek or in combination with any other school after five practices have been completed. This is appealable to an administrative team consisting of the athletic director and principal/superintendent.
3. Only fifth- and eighth-grade athletes asked by the high school coach and with the approval of the junior high coach in the sports, the player and the parent/guardian of the athlete and the Board of Directors, would play on the high school team or junior high school team (in the case of a fifth-grade athlete) for that sports.

GENERAL RULES

Suspension From School

Extra-curricular participants on in-school suspension will continue to practice and compete interscholastically within the confines of the coach's policies and guidelines.

Extra-curricular participants on out-of-school suspension will not be allowed to practice or compete interscholastically for the duration of the suspension. Each practice missed by the participant will result in a suspension of one game. These practices missed will not count against them with regard to Attendance Rule 2.

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Repeated Ineligibility

Any extra-curricular participant declared ineligible for the third time in an activity season will be removed from the activity. The extra-curricular participant would not receive a letter or any awards.

Transferring Activities

No participant may drop one activity and transfer to another during the same season without approval of coaches and the athletic director. Any participant removed from a team may not join another team.

Use of School Uniform/Equipment

School owned uniforms and equipment are to be used only for practice and games. The wearing of uniforms on game day is permissible if approved by the coach. It is a violation of WIAA rules to use school district uniforms or equipment for non-school activities, such as AAU or summer programs. These activities must supply their own needs.

Out-Of-Season Philosophy

Wilson Creek School District's philosophy is that no participant will be encouraged or threatened to participate in our-of-season clinics or camps in order to gain status, playing time or any other benefit for attending. These are teenaged young men and women and should be able to have the summer to himself/herself, if so desired. No coach will do or say anything to discourage that desire by any participant.

Procedure

Any extra-curricular participant who does not abide by the rules and regulations of his/her coach and this extra-curricular code is subject to warning, suspension or expulsion from the activity.

SPECIFIC RULES

Substance Abuse (on or off campus)

The participant will not possess, use, distribute or provide for sale any controlled substance, illicit drug or substance purported to be such. The following rules will have a cumulative effect and will build from year to year.

1. First Offense/Step 1: Expulsion from the activity for the remainder of the season
2. Second Offense/Step 2: Expulsion from all extra-curricular activities for one calendar year from the date of the violation
3. Third Offense/Step 3: Expulsion from all extra-curricular activities for the remainder of his/her high school career

Alcohol/Tobacco Possession, Use, Distribution or Sale Abuse (on or off campus)

The participant will not violate any substance abuse item.

1. First Offense/Step 1: Suspension for 15 school days of the season. These 15 days begin after the WIAA required practice days are met for that sport or activity. Three sessions with the drug counselor will also be required. The participant will not be able to resume practice until both conditions are completed.
2. Second Offense/Step 2: Expulsion from all extra-curricular activities for one calendar year from the date of the violation.
3. Third Offense/Step 3: Expulsion from all extra-curricular activities for the remainder of his/her high school career

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Appearance

Our participants are representatives of our school and community, and as such their appearance shall meet expectations reflecting good taste. Coaches are to insist on good standards of appearance for their teams. All of the dress code items listed in the student handbook shall apply to participants in extra-curricular activities or any school-sponsored activities.

DURATION OF TRAINING RULES

Training rules begin the first practice/meeting of the activity season and are in force through the last contest scheduled by the program at such time as the participant is transported back to school and released by the coach/advisor.

APPEALS

Any decision made under the extra-curricular code can be appealed. Such appeals are to be made in writing to the athletic director. Appeals must be made within five (5) school days of the notification of the penalty for infraction. The appeal will consist of a signed document from the participant and from his/her parent/legal guardian. An emancipated minor or legal adult of age eighteen (18) and older may sign for himself/herself. The administrative council, consisting of the athletic director and principal/superintendent will hear such appeals within five (5) school days of receiving the written notice. The administrative council will have the power to uphold, alter or reverse any decision made under this code. Any further appeals beyond the administrative council will need to follow district complaint policy procedures found in the district policy manual.

AWARDS

Any extra-curricular letter award is a symbol of accomplishment, good sportsmanship and observance of extra-curricular policies. Since the award is a symbol of accomplishment, its value lies in its implication. To qualify for a letter award, a participant must meet the requirement established in that activity by the coach. These letter awards shall only be presented to participants who complete the entire season except for those who could not because of illness or injury.

TRAVEL

The coach will insist on proper behavior and maintenance of the bus rules while traveling for activities. All participants are to travel to and from extra-curricular activities with the team in transportation provided by the school district with the following exceptions:

1. Parents may transport their own children after any activity. Parents must first sign their children out with the bus driver. Noted exceptions are as follows:
 - a. There is NO student to student release
 - b. Transportation with any other parent/relative needs approval from both parties involved
 - c. All exceptions must have WRITTEN APPROVAL from ALL parties involved. This approval must be given to the coach/supervisor. The coach/supervisor has the final decision on all exceptions and has the ability to DENY a request.

These exceptions apply to transportation from a practice from a site other than Wilson Creek.

**WILSON CREEK SCHOOL DISTRICT 167-202
CO-CURRICULAR CODE AGREEMENTS**

I, _____, have read and understand the Wilson Creek School District Co-Curricular Code. Further, I agree to abide by the rules and understand that any violation by me shall result in actions as outlined in the code.

Student Signature

Date



I, _____, have read and understand the Wilson Creek School District Extra-Curricular Code.

Parent/Guardian Signature

Date

WILSON CREEK SCHOOL DISTRICT 167-202 STUDENT-PARENT/GUARDIAN WARNING

It is the school district's intent to provide any athlete with good instruction, safe equipment and safe transportation, but we cannot eliminate all risks involved in sports participation. **Accidental injury, completely unrelated to any preventable cause, is always possible.**

This warning form is designed to provide this school district with a degree of protection. It is not designed to deny the rights of an injured athlete. **Our school district provides WIAA Catastrophic Medical Insurance Coverage to participating students.** Participation in WIAA sponsored interscholastic activities is all voluntary and extra-curricular. As a condition to participation in these activities, you and your parent(s)/guardian(s) must understand the risks involved in these kinds of activities.

WARNING

Participation in any athletic activity may involve injury of some type to either you or a fellow student athlete. Such injury can include direct physical and possibly crippling injury to one's body and the possibility of emotional injury experience as a result of witnessing or actually inflicting injury to another. The severity of such injury can range from minor to catastrophic injury such as complete paralysis or even one's future ability to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

Activity injuries can result from the incorrect or correct performance of playing techniques used in tryouts, practices, warm-ups, games, drills, exercises and other similar undertakings. Injury can also result from failing to follow game, training, safety or other team rules. Injury can result from the use of transportation provided or arranged by the school district to and from interscholastic activity.

Therefore, the purpose of this warning is to aid you in making an informed decision as to whether you/your child or ward should participate in these activities. In addition, its purpose is to make you aware that as a student participant, or as a parent or guardian of a student participant, it is your responsibility to learn about and/or inquire of coaches, physicians, advisor or other knowledgeable persons about any concerns that you might have at any time regarding participant's safety.

By signing this document, I/we acknowledge that I/we have read and understand its contents and warning related to the above stated risks and give my/our permission for my/our son/daughter to participate in interscholastic activities.

Student Signature

Date

Parent/Guardian Signature

Date

WILSON CREEK SCHOOL DISTRICT 167-202
CO-CURRICULAR REGISTRATION FORMS: 2010/2011

Student Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Age: _____ Birth date: _____ Social Security Number: _____

Parent(s)/Guardian(s): _____

Home phone: _____ Work phone: _____

Address: _____ City: _____ Zip: _____

EMERGENCY/MEDICAL INFORMATION

Hospital preference: _____ Phone: _____

Emergency contact person: _____ Phone: _____

Does the student have any special medical problems? _____ Yes _____ No

If yes, please specify: _____

Is the student taking any medication? _____ Yes _____ No

If yes, please specify: _____

Is the student allergic to any drugs? _____ Yes _____ No

If yes, please specify: _____

When did the student receive their last tetanus shot? _____

May coaches/advisors use non-prescription medications, such as analgesic balms, sucrose, salt tablets, non-aspirin tablets for this student? _____ Yes _____ No

If the parent(s)/guardian(s) and/or authorized physician named above cannot be reached at the time of the emergency, and if immediate observation or treatment is urgent in the judgment of the school authorities, do you authorize and direct the school authorities to send the pupil, properly accompanied, to the hospital or doctor most easily accessible? _____ Yes _____ No

Do you agree to be financially responsible for all expenses incurred for treatment under the circumstances described above? _____ Yes _____ No

If an ambulance is called, do you agree to be financially responsible for expenses incurred? _____ Yes _____ No

If you answered NO to any above, please explain what action you desire school authorities to take:

**WILSON CREEK SCHOOL DISTRICT 167-202
CO-CURRICULAR REGISTRATION FORMS: 2010/2011**

Insurance Information

I understand my son/daughter cannot participate in extra-curricular activities unless covered by the School Accident Coverage Plan or our own plan.

Complete either Part A – OR – Part B

A Please enroll _____ in the School Accident Coverage Plan. I have included the cost of the following options:

1. 24-Hour Coverage

- a. Preferred Option _____
- b. Economy Option _____
- c. Budget Option _____

2. School Time ONLY Coverage

- a. Preferred Option _____
- b. Economy Option _____
- c. Budget Option _____

3. Dental Coverage

4. Football ONLY (Grades 10-12)

- a. Preferred Option _____
- b. Economy Option _____
- c. Budget Option _____

B _____ will be covered by the following insurance:

_____ Group #: _____

I.D. #: _____

I will continue to keep this insurance in force throughout the school year. Therefore, I do not wish to enroll in the School Accident Coverage Plan. I accept full responsibility for the cost of treatment for any injury suffered while taking part in any extra-curricular program.

Parent/Guardian Signature

Date

**WILSON CREEK SCHOOL DISTRICT 167-202
MEDICAL EMERGENCY AUTHORIZATION FORM**

TO BE COMPLETED BY PARENT/GUARDIAN AND RETURNED TO DISTRICT OFFICE

Name of Student Athlete: _____

As parent or legal guardian, I authorize the team physician or, in his/her absence, a qualified physician, to examine the above-named student and in the event of injury to administer emergency care and to arrange for any consultation by a specialist, including a surgeon, he/she deems necessary to ensure proper care of any injury. Every effort will be made to contact parent/guardian to explain the nature of the problem prior to any involved treatment.

Parent/Guardian Signature Date

Parent/Guardian Home Phone: _____ Work Phone: _____

Emergency Contact Person: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

.....

FOR SCHOOL USE ONLY

Completed form received _____ by _____
Date Name

Duplicate copy distributed to _____

_____ on _____
Date

Insurance coverage by parents? _____ Yes _____ No _____ Unknown

One copy filed in student's permanent record _____ by _____
Date Name

WILSON CREEK SCHOOL DISTRICT 167-202

AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT

As legal custodian of _____, a minor, I hereby authorize the principal/superintendent or his/her designee, into whose care the aforementioned pupil has been entrusted, to initiate paramedic/ambulance care or transport for said minor and to consent to any X-ray, examination, anesthetic, medical or surgical diagnosis, treatment and/or hospital care to be rendered to said minor upon the advice of any licensed physician and/or dentist.

I understand this authorization is given in advance of any required diagnosis, treatment or hospital care and provides authority and power to the aforementioned agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which a licensed physician or dentist may deem necessary.

This authorization shall remain effective for the full school year unless revoked in writing and delivered to said agent(s). I understand that the Wilson Creek School District 167-202, its employees and its Board of Directors assume no liability of any nature in relation to the transportation or treatment of said minor. I further understand that all cost of paramedic/ambulance transportation, hospitalization and any examination, X-ray or treatment provided in relation to this authorization shall be my responsibility.

I understand that the Wilson Creek School District 167-202 does not provide medical insurance for student injuries but does offer student accident/health insurance for voluntary purchase. I have received the information and application for this program.

PLEASE CHECK: I WILL enroll my child in the student accident/health insurance program
An enrollment packet will be supplied to you by the school upon receipt of his form

I will NOT enroll my child in the student accident/health insurance program

Family Doctor	Address	Phone
Health Plan/Insurance		Group/Policy Number
My child is allergic to the following medications:		
Other medications used:		
My child has the following health problems:		

Parent/Guardian Signature

Date

WILSON CREEK SCHOOL DISTRICT 167-202

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 of concussion may include one or more of the following:

- Headache
- “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
- 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 of concussion 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

Adapted from the CDC and the 3rd International Conference on Concussion in Sport

Document created June 15, 2009

WILSON CREEK SCHOOL DISTRICT 167-202 CONCUSSION INFORMATION SHEET

What can happen if my child keeps playing with a concussion or returns 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 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 young 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

"... 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 is 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,
visit www.cdc.gov/concussion/HeadsUp/youth.html**

Student-Athlete Name Printed

Student-Athlete Signature

Date

Parent/Guardian Name Printed

Parent-Guardian Signature

Date

Adapted from the CDC and the 3rd International Conference on Concussion in Sport

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