

**SAHUARO HIGH SCHOOL
ATHLETIC ELIGIBILITY PACKET**

PLEASE - READ AND COMPLETE FULL PACKET

BEFORE YOUR FIRST PRACTICE/TRYOUT

REMEMBER TO PROVIDE A Receipt for \$50.00 fee paid FROM THE FINANCE OFFICE

***** PLEASE NOTE...NO MORE REFUNDS-- THIS IS AN AUTOMATIC TAX CREDIT*****

Athlete and parent/guardian must read ALL pages in this packet, and then place your initials on each item below indicating that you both have read the information. The initials and signatures indicate that athlete and parent are aware of the policies contained in this packet.

**Athlete
Initials**

**Parent
Initials**

- EMERGENCY CARD AND PARENT PERMISSION CARD**
- PHYSICAL FORM- FRONT/BACK**
- PARENT/PARTICIPANT TRANSPORTION- FRONT/BACK**
- STATEMENT OF RESIDENCY/INSURANCE FORM**
- PERMISSION TO POST PHOTOGRAPHS ON TUSD WEBSITE/WATER FORM**
- CODE OF CONDUCT, PARENTS/GUARDIANS, SPECTATORS/SUBSTANCE POLICY FOR ATHLETES**
- AIA POSITION STATEMENT REGARDING SUPPLEMENTS, DRUGS AND PERFORMANCE ENHANCING SUBSTANCES**
- PARTICIPATION FEES --REFUND POLICY --EQUIPMENT/UNIFORM POLICY**
- FYI POLICIES**
- EXPECTATIONS AND PHILOSOPHY LETTER**
- YOU PROVIDE A COPY OF BIRTH CERTIFICATE FOR FIRST TIME ATHLETE**

INTERSCHOLASTIC EMERGENCY INFORMATION CARD

(please print)

School Year _____ Sport _____

Student's Name _____ High School _____

Matric # _____ Age _____ Birthdate _____
Month Day Year

Student's Home Address _____ Zip _____

Father _____ Home _____ Work _____ Cell _____

Mother _____ Home _____ Work _____ Cell _____

Guardian _____ Home _____ Work _____ Cell _____

Other individual to notify if necessary _____ Phone _____

Preferred Hospital _____ Family Physician _____ Phone _____

If student is now under medical treatment, why and the doctor's name _____

The team physician, Certified Athletic Trainer, and /or coach may apply emergency treatment until the parent/guardian can be contacted.

We give our consent for school officials or coaches to use their own judgment in securing aid, transportation, and ambulance service in case the parent/guardian cannot be reached.

Parent/Guardian Signature _____ Date _____

TUSD #693
Stock #17852
REV 6/03

ORIGINAL - TRAINER YELLOW - COACH PINK - SITE COPY

Student's Name _____ Matric _____ Grade _____

Ethnicity: White _____ African American _____ Hispanic _____ American Indian or Alaskan Native _____ Asian or Pacific Islander _____

PARENT/GUARDIAN PERMISSION FOR PARTICIPATION IN INTERSCHOLASTIC ACTIVITIES

We/I give our consent for _____ to engage in interscholastic athletic competition and other activities during the school year 20____-20____. We/I realize that participation in organized interscholastic athletics involves the potential for injury which is inherent in all sports. We acknowledge that even with the best coaching, use of the most advanced protective equipment and strict observation of rules, injuries are still a possibility. On rare occasions these injuries can be so severe as to result in total disability, paralysis, quadriplegia, or even death.

WE ACKNOWLEDGE THAT WE HAVE READ AND UNDERSTAND THIS WARNING

(This school district does not carry an accident insurance policy to cover injuries sustained in the interscholastic program. Accident insurance is the responsibility of the parents or guardians. As a convenience, an individual accident insurance policy form may be picked up in the high school Activities Office. (Payment and/or correspondence is through the insurance company.)

We/I certify that the address/phone number listed below is correct. We/I accept the responsibility of notifying the school if this address/phone number should change during the current school year.

We do have medical insurance for the student named above. Yes _____ No _____

(Signature of Parent/Guardian)

(Date)

(Home Address)

(Zip Code)

(Home Phone)

(Emergency/Parent's Work Phone)

OFFICE USE:

TUSD #112 Rev. 5/95

Physical Exam _____ Fees _____ Grades _____ Emergency Card _____ Date of Birth _____

TUCSON UNIFIED SCHOOL DISTRICT ANNUAL PHYSICAL EXAMINATION

Student's Name _____ School Year _____

Sport/Activity _____ School _____ Grade _____ Matric # _____

Date of Birth _____ Age _____ Address _____

Gender M or F _____ Date of Examination _____

Height: _____ Weight: _____ Pulse: _____ BP: _____ Pupils: _____ Equal _____ Unequal _____

Vision: R20/ _____ L20/ _____ Glasses/Contacts: Yes _____ No _____

MEDICAL	Normal	Abnormal Findings	Initials	MUSCULOSKELETAL	Normal	Abnormal Findings	Initials
Appearance	_____	_____	_____	Neck	_____	_____	_____
Skin	_____	_____	_____	Back	_____	_____	_____
Eyes/Ears/Nose	_____	_____	_____	Shoulder/Arm	_____	_____	_____
Throat/Oropharynx	_____	_____	_____	Elbow/forearm	_____	_____	_____
Lymph Nodes	_____	_____	_____	Wrist/hand	_____	_____	_____
Heart	_____	_____	_____	Hip/thigh	_____	_____	_____
Pulses	_____	_____	_____	Knee	_____	_____	_____
Lungs	_____	_____	_____	Leg/ankle	_____	_____	_____
Abdomen	_____	_____	_____	Foot	_____	_____	_____
Genitalia/Hernia	_____	_____	_____				

CLEARANCE

Cleared

Cleared after completing evaluation/rehabilitation for: _____

Not Cleared for: _____ Reason: _____

Recommendations: _____

Name of physician (print/type) _____ Date _____

Address _____ Phone _____

Signature of physician: _____

TUSD INTERSCHOLASTIC ATHLETIC TRANSPORTATION GUIDELINES

Please ✓ the appropriate box and complete the form below.

PARENT TRANSPORTATION – SEASON

I/We, _____ and _____, parents or legal guardians of _____, wish to provide transportation for our daughter/son to all of the away (sport) _____ games for the current school year.

Please check here if you will only be providing transportation home from these contests.

PARENT TRANSPORTATION – GAME

I/We, _____ and _____, parents or legal guardians of _____, wish to provide transportation for our daughter/son to the away(sport) _____ game to be held at (site) _____ on (date) _____.

Please check here if you will only be providing transportation home from this contest.

I/We understand that we are waiving any claims I/we may have against the Tucson Unified School District, and are relieving the District of any liability with regard to the safe transport of my/our daughter/son.

My/our vehicle is insured with a minimum of \$15,000/\$30,000/\$10,000 liability and \$15,000/\$30,000 uninsured motorist insurance coverage.

I/We understand that I/we may transport ONLY my/our daughter/son to the contest, and that this approval must be received by the Assistant Principal for Activities one day prior to the above named sport season.

I/We also understand the violation of these Transportation Regulations and Guidelines will result in my/our daughter/son being barred from participating in the next contest.

(Parent's Signature) (Date)

(Parent's Signature) (Date)

Accepted by: _____ (School Administrator) (Date)

TUSD INTERSCHOLASTIC ATHLETIC TRANSPORTATION GUIDELINES

Please ✓ the appropriate box and complete the form below.

PARTICIPANT TRANSPORTATION – SEASON

I/We, _____ and _____, parents or legal guardians of _____, hereby grant permission to transport him/herself to all of the away (sport) _____ games for the current school year.

PARTICIPANT TRANSPORTATION – GAME

I/We, _____ and _____, parents or legal guardians of _____, hereby grant permission to transport him/herself to the (sport) _____ game to be held at (site) _____ on (date) _____.

I/We understand that we are waiving any claims I/we may have against the Tucson Unified School District, and are relieving the District of any liability with regard to the safe transport of my/our daughter/son. I/We understand that students transporting themselves are not allowed to transport any other students, spectators, players, etc.

My/our vehicle is insured with a minimum of \$15,000/\$30,000/\$10,000 liability and \$15,000/\$30,000 uninsured motorist insurance coverage.

I/We also understand that the violation of these Transportation Regulations and Guidelines will result in my/our daughter/son being barred from participating in the next contest.

(Parent's Signature)

(Date)

(Parent's Signature)

(Date)

I, _____, will be transporting myself to the above named contest, and I understand that I am waiving any claim I may have against the Tucson Unified School District, and I am relieving the District of any liability with regard to my safe transport. I also possess a valid driver's license.

I understand that I am not allowed to transport any other students, players or spectators, and that this approval must be received by the school Assistant Principal for Activities one day prior to the contest.

I also understand that violation of these Transportation Regulations and Guidelines will result in my being barred from participating in the next contest.

(Student's Signature)

(Date)

Accepted by:

(School Administrator)

(Date)

Communicable Skin Lesions and Infectious Diseases

Due to the nature of competitive sports, there is an increased risk for the spread of infectious diseases and communicable skin lesions. These may include, but are not limited to: impetigo (bacterial infection), community acquired methicillin resistant staphylococcus aureus infection (MRSA), herpes gladiatorum (viral infection), ringworm (fungal infection), and conjunctivitis (pink eye).

TUSD makes the following suggestions to prevent the spread of communicable skin lesions and infectious diseases:

- immediately shower after practice and competition
- wash all athletic clothing and athletic gear, worn during practice or competition every day
- clean and disinfect gym bags and/or travel bags if the athlete is carrying dirty workout gear home to be washed and then bringing clean gear back to school in the same bag
- use disposable bags to carry used athletic clothes and gear
- wash athletic gear like new pads and neoprene braces regularly
- clean and disinfect protective gear such as helmets, shoulder pads, and catchers gear on a regular basis
- do not share towels, razors, or other personal hygiene products
- perform a self inspection of your skin daily
- skin lesions that are identified during a self inspection will be brought to the immediate attention of the coach and athletic trainer
- athletes should bring all questionable lesions on fellow athletes to the immediate attention of the coach and athletic trainer to be immediately covered

STATEMENT OF RESIDENCY FORM

THIS FORM IS TO BE COMPLETED FOR ALL STUDENT-ATHLETES WHO ARE COMPETING AT SAHUARO HIGH SCHOOL.

Student Name _____ Grade _____

Current Home Address _____ Zip Code _____

Does the student reside with his/her parents or legal guardian? Yes _____ No _____

Did the student transfer to Sahuaro from another high school? Yes _____ No _____

If yes, name, city, and state of the high school _____

Date of enrollment at Sahuaro _____

We, the undersigned parent/guardian and student, affirm;

_____ THAT OUR PRIMARY RESIDENCE IS WITHIN THE ATTENDANCE BOUNDARIES FOR SAHUARO HIGH SCHOOL.

OR

_____ THAT WE HAVE RECEIVED PERMISSION FROM TUSD FOR THIS STUDENT TO ATTEND SAHUARO HIGH SCHOOL AS A NON-RESIDENT STUDENT, AND HAVE COMPLETED A 530 FORM TO VERIFY ELIGIBILITY FOR THE SPORTS THAT THIS STUDENT WANTS TO AND/OR PLANS TO PARTICIPATE OR THAT THIS STUDENT HAS BEEN ENROLLED AT SAHUARO HIGH SCHOOL FOR AT LEAST ONE CALENDAR YEAR.

STATEMENT OF INSURANCE POLICY

I/We affirm that Tucson Unified School District and Sahuaro High School does not purchase and does not have accidental insurance coverage for athletes/students who participate in athletics and/or activities. Parents/Guardians are strongly encouraged to purchase an accident insurance policy to cover injuries that your student may incur as a result of participation in athletics and/or activities.

Signature of Parent/Guardian of Student

Date

Signature of Student

Date



TUSD Parent Permission Form
Interscholastic/Extracurricular Programs

I hereby give permission to _____ School to post photographs of my son/daughter _____ on the school's and/or TUSD Interscholastics Internet website for an indefinite amount of time. My son/daughter and I shall forever waive and release any claim he/she and I may have against the school and TUSD arising from the photographs whether known or unknown, and shall hold TUSD and any successor or successors in interest harmless from the same.

Signature of Parent or Guardian Date

What You Need to Know About Water

The overall health and wellness of the students in TUSD is of utmost importance. With the close proximity of the student athlete's during sports participation, transmission of certain diseases is inevitable. The following recommendations are to decrease the possibility of water borne disease transmission and to ensure safe participation of TUSD's student athletes

1. Each athlete is responsible for bringing a drinking container to his or her sport practice. This container needs to be:
 - Reusable, refillable and washable.
 - Clearly labeled for easy recognition by the student athlete.
2. Athletes are not allowed to share drinking containers.
3. Each athlete is responsible for cleaning his or her drinking container daily and this cleaning it to be done at home. The recommended cleaning procedure is to rinse the inside, outside and lid of this container in hot soapy water and allow to air dry. Once a week, the container should be cleaned in the dishwasher or with a disinfectant solution.
4. For athletic contests, each athlete is recommended to continue using his or her own personal water bottle. For some events, this is not feasible; therefore water bottles or cups will be provided by the school for use by the athletic team. Each athlete is responsible for proper use of the water bottles. **This includes not placing their mouth on any part of the water bottle.** The athletic trainer at each school will clean and disinfect the water bottles after each event use.

There will be access to water at each practice and/or athletic event for the purpose of refilling personal water bottles. If a student athlete forgets his or her water container or is not able to supply his or her own, one may be checked out on a daily basis from the athletic trainer. It is the responsibility of the student athlete to return this bottle to the athletic trainer at the end of each practice.

If you have any question, please feel free to contact your school's certified athletic trainer.

Parent Signature

Date

Student Signature

**ATHLETIC CODE OF CONDUCT FOR SPECTATORS AND FANS AT
SAHUARO HIGH SCHOOL**

As a spectator attending a Sahuaro High School athletic event:

I recognize

- that the goal of this event is to provide young people with the opportunity for healthy competition in the spirit of sportsmanship and camaraderie.
- that I have a role to project a positive and supportive attitude as well as to show respect toward all of the participants, including the officials, coaches, and the other team.
- that my words and behavior have a powerful impact on those around me and that I have a role to conduct myself in a mature and dignified fashion. I should not say, make, or promote profane comments, obscene gestures, offensive remarks, trash talking, or taunting of any participant during or after the event.
- that I should cheer for my team and players and not cheer against the other team or their players.
- that I should exhibit good character and conduct myself as a positive role model for all spectators and participants
- that attendance at an athletic event is a privilege, not a right, and that I am expected to represent my team, my community, my family, and myself with honor.
- that for the orderly management of this event, I have a role to adhere to directions stated by school authorities and the game management staff.
- that if my conduct is not conducive to a positive environment, I may be asked to leave this event.

(Sahuaro game management staff determines the appropriateness of spectator behavior)

Tobacco, Drug, and Alcohol Policy for Athletes

Substance abuse in any form while participating in high school activities may result in forfeiting a student's eligibility.

Any use of tobacco, drugs, or alcohol of a participant during the season of activity may result in dismissal from a team or suspension from a team/game.

Signature of parent/guardian _____ **Date** _____
Signature of participant _____ **Date** _____



ARIZONA INTERSCHOLASTIC ASSOCIATION, INC.
7007 North 18th Street, Phoenix, Arizona 85020-5552
Phone: (602) 385-3810 Fax: (602) 385-3779

AIA POSITION STATEMENT

SUPPLEMENTS, DRUGS AND PERFORMANCE ENHANCING SUBSTANCES

PURPOSE OF FORM: All AIA Member schools are required to **ANNUALLY** communicate this AIA Position Statement on the use of supplements, drugs and performance enhancing substances to every participant in interscholastic activities. (See Article 14, Section 14.13.2)

The Arizona Interscholastic Association (AIA) views sport, and the participation of student-athletes in sport, as an activity that enhances the student-athlete's well-being by providing an environment and stimulus that promotes growth and development along a healthy and ethically based path.

- It is the position of the AIA that a balanced diet, providing sufficient calories, is optimal for meeting the nutritional needs of the growing student-athlete.
- It is the position of the AIA that nutritional supplements are rarely, if ever, needed to replace a healthy diet.
- Nutritional supplement use for specific medical conditions may be given individual consideration.
- The AIA is strongly opposed to "doping", defined as those substances and procedures listed on the World Anti Doping Agency's Prohibited List (www.wada-ama.org).
- It is the position of the AIA that there is no place for the use of recreational drugs, alcohol or tobacco in the lifestyle of the student-athlete. The legal consequences for the use of these products by a student-athlete are supported by the AIA.

In pursuit of **Victory with Honor**, the AIA promotes the use of exercise and sport as a mechanism to establish current fitness and long-term healthy lifestyle behaviors. It is the position of the AIA that the student-athlete, who consumes a balanced diet, practices sport frequently and consistently, and perseveres in the face of challenges, can meet these goals.

Participation Fees

1. Pay the \$50 participation fee in the Finance Office for each sport. There is a \$150.00 cap for individuals per year, and a \$200.00 maximum charge for families per school year.

PARTICIPATION FEE REFUND POLICY

THERE WILL BE NO REFUNDS FOR PARTICIPATION FEES- ALL PARTICIPATION FEES ARE AN AUTOMATIC TAX CREDIT. YOU WILL RECEIVE A RECEIPT FOR YOUR INCOME TAXES

NO TRANSFER OF FINE ARTS FEES TO ATHLETIC FEES AND VICE-VERSA

RESPONSIBILITY FOR EQUIPMENT AND UNIFORM RETURN POLICY

I/WE agree to be responsible for the safe return of all athletic equipment and uniforms issued by the school to the student.

Students who do not return all athletic equipment and uniforms issued by the school to the student after the season of sport will not be permitted to participate in competition of his/her next sport until that equipment and/or uniform has been returned to the school or that the student has paid for the equipment and/or uniform items not returned AND that athlete has been cleared by the Activities Office. Seniors who have not returned all athletic equipment and uniforms issued by the school to the student or have not paid for the equipment and/or uniform items not returned AND have been cleared by the Activities Office MAY NOT BE ALLOWED TO PARTICIPATE IN GRADUATION CEREMONIES.

Students who quit a sport or are removed from a sport before the end of the season are required to return all athletic equipment and uniforms issued by the school to the student within 72 hours after quitting the sport or being removed from the sport. Students who do not return all athletic equipment and uniforms issued by the school to the student within 72 hours after quitting the sport or being removed from the sport will not be permitted to participate in competition of his/her next sport until that equipment and/or uniform has been returned to the school or that the student has paid for the equipment and/or uniform items not returned AND that athlete has been cleared by the Activities Office.

After the 72 hour deadline has passed, the Activities Director or Assistant Principal for Activities is authorized to direct school personnel to enter and clear the assigned athletic locker of the student without the presence of the student. School personnel will record all items removed from the assigned athletic locker. Athletic equipment and/or uniform items issued by the school will be checked against the items issued to the student and returned to the athletic storage area. Items not issued by the high school athletic program will be turned over to the high school lost and found.

OTHER FYI POLICES THAT YOU NEED TO KNOW

- **ATHLETICS:** If a student sees a medical professional for treatment of an injury, that medical professional must provide the athletic trainer with a written release before that student may participate in a practice or competition.
- **ATHLETICS:** A student who is a member of a school team cannot practice or compete for or with any other group, club, organization, association, etc., in that same sport during the interscholastic season of competition of that sport as defined in the A.I.A. by-laws. Any student violating this policy shall forfeit his/her eligibility for a minimum of the balance of the season. See the Activities Director or Assistant Principal for Activities for information about exceptions to this rule.
- **ATHLETICS AND ACTIVITIES:** Attendance in ALL CLASSES is required for an athlete to practice or play in a game. A valid excuse for any absence must be approved by school administration prior to the absence. Any violation of this policy will result in the student's ineligibility for the practice or game. The team will forfeit any game in which an ineligible athlete plays because he or she did not attend all classes that day.
- **ATHLETICS AND ACTIVITIES:** Students are expected to use the transportation provided by the school and/or district to all away contests or events. With the approval of the coach or sponsor AND with the submission of the proper paperwork to the Activities Office, parents may only transport their student or students may transport themselves to the contest or event declared on the paperwork.

PARENTS TRANSPORTING THEIR CHILD:

1. Complete TUSD transportation request (TUSD 0828A).
 2. Submit completed form to the Activities Office at least one day before the game or event.
- **ATHLETICS AND ACTIVITIES:** Students are required to complete the season for that sport or activity in order to receive a letter or other award for that sport or activity. Exceptions to this policy must be approved by the coach or sponsor AND the Assistant Principal for Activities.
 - **ATHLETICS AND ACTIVITIES:** Students must pass all the classes in which they are enrolled in order to participate in an A.I.A. sanctioned event. Grades are reviewed every 4½ weeks, but eligibility is determined every nine (9) weeks. Students declared ineligible when grades for a quarter are reviewed may regain eligibility when grades are reviewed at the next 4½ grade review. Freshmen, sophomores, and juniors must be enrolled in at least 5 credit-bearing classes to maintain eligibility. Seniors who are meeting ALL graduation requirements must be enrolled in at least 4 credit-bearing classes to maintain eligibility.

**PLEASE SEE THE ACTIVITIES DIRECTOR OR ASSISTANT PRINCIPAL
OF ACTIVITIES TO REVIEW THE COMPLETE LIST OF POLICIES THAT APPLY TO
ATHLETICS AND/OR ACTIVITIES**

EXPECTATIONS AND PHILOSOPHY LETTER

To the Parent/Guardian and Student:

We would like to take a moment to partially explain how the athletic and activities programs are conducted at Sahuaro High School.

In each program, coaches and sponsors are selected by the school to be responsible for team and/or program selection. The coach or sponsor establishes conditions for selection, possibly with input from other coaches and assistants. This may be a highly subjective process and any one of us might select different students for the team or program. We believe it is the responsibility and right of the coach or sponsor to select the members of the team or program with whom they will work for the season and/or event.

A main goal of a competitive team or program is to use the best combination of students available, in the judgment of the coach or sponsor, to win the contest and/or have a successful event. Starting positions, playing time, and roles for a game or event are not guaranteed to any student. Each member of the team or program is very valuable to the overall progress of the team or program. Some students may play a great amount of time in a game or receive a big role for an event while other students may not receive what might be considered "significant" playing or performance time. We believe it is the responsibility and right of the coach or sponsor to determine the time and/or role received by each student during each game or event. Each student should have personal improvement as one of his/her goals.

Every team and program wants to win or have a successful event and each coach or sponsor wants to win or have a successful event. In the attempt to win or have a successful event, coaches and sponsors will use different strategies at appropriate times. These strategies might differ with the decisions you might have made if you were the coach or sponsor. The coaches and sponsors do the best that they can to make the proper decisions so that our teams play well and win the game or have a successful event. We believe it is the responsibility and right of the coach or sponsor to determine the strategies used during a game or event.

There may be times when you have a concern about your student's participation on our teams and/or in our programs. When these concerns arise, we ask that you use the following chain of command to deal with the concern:

- ✓ First, have your student talk with the coach or sponsor.
- ✓ Second, if the concern has not been resolved, then the parent/guardian should request a meeting with the coach or sponsor outside of class time, practice time, and event time.
- ✓ Third, if these two steps have not succeeded, then the parent/guardian may request a meeting with the Activities Director. The student, coach or sponsor will be included in this meeting.
- ✓ Fourth, if these meetings have not addressed your concerns to your satisfaction, the parent/guardian and student may request a meeting with the Assistant Principal for Activities, in which the coach or sponsor, parent, student and Activities Director will attend.

We believe that by using this approach, most of the concerns can be resolved to the benefit of all.

By being a parent/guardian and student in an activity, regardless of the time spent in the game or event, you can learn many valuable lessons. These lessons include good sportsmanship, appreciating good play by an opponent or other performers, respect for all participants in the game or event, self-control, and accepting the responsibility for the actions that we demonstrate.

We hope this letter helps you to understand some of the goals and philosophies of the athletic and activities programs at Sahuaro High School.