

2016-17 STUDENT-ATHLETE & PARENT/GUARDIAN HANDBOOK



FOLSOM CORDOVA UNIFIED SCHOOL DISTRICT

1965 Birkmont Drive

Rancho Cordova, CA 95742

Phone (916) 294-9000 ❖ Fax (916) 294-9020

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Business Services

On behalf of the coaches, advisors, teachers and administrators of the Folsom Cordova Unified School District, we welcome you to our district's athletic program and wish you a successful season ahead. In order to ensure an enriching and rewarding experience, we provide this Student Athlete & Parent Handbook with rules and policies that will guide your participation in school athletics.

IMPORTANT-Please Read This Handbook In Its Entirety

An important value we expect from all our athletes is integrity. Because of this, we ask that you do not sign on the dotted line until you have read the handbook and agreed to abide by its rules and guidelines.

Philosophy of Student Athletics

Folsom Cordova Unified School District recognizes athletic competition as an integral part of the school experience. As such, all athletes should have the opportunity to participate in some form of interscholastic athletics within the limitations of each individual sport and such participation should encourage positive scholastic growth and achievement. Both the student athlete and the sport itself should be a credit to the school and the community. The Folsom Cordova Unified School District realizes that an effective interscholastic athletic program is a product of the responsible cooperation among its four major contributors: the student athlete, parents, the coaching staff, and the site and district administration.

Folsom Cordova Unified School District strives to strengthen the integrity of students and adults in the community by promoting the concepts of sportsmanship, honesty and quality academics. These priorities advance the highest principles of character, trustworthiness, respect, responsibility, fairness, caring, and good citizenship.

Participating in Athletics

Participation in school sports programs is a privilege, not a right. To earn that privilege, students must abide by the rules, and they must conduct themselves as positive role models who exemplify good character. The school intends to maintain programs that are well managed and meet the needs of the students and the school community. Athletic schedules and coaching information can be found on our individual school websites. To find your school, go to <http://www.fcusd.org>, click on *Our Schools*, find your school, and then the appropriate link.

The FCUSD athletic program will promote sportsmanship and foster the development of good character by enhancing the academic, emotional, social, physical and ethical development of students and teaching positive life skills that will help students become personally successful and socially responsible.

Through their participation as a member of an athletic team or program, students are considered representatives of FCUSD, and as such, are expected to maintain exemplary behavior and citizenship. All students will be held responsible for any involvement in acts specified in the Student Handbook (Campus Rules / Policies) whether on campus, at school activities or in the community.

Athletic Eligibility and Guidelines

All athletes will abide by the California Interscholastic Federation (CIF) rules. For more specific information, athletes and their families can visit the CIF website at www.cifsjs.org.

1. Residential Eligibility

- i. The CIF requires that students who participate on a school team must be living with parents or legal guardians who reside within the school's attendance boundaries.
- ii. If a student is transferring from another high school, they **MUST** contact the athletic director immediately to determine eligibility.

2. Academic Eligibility

- i. The participant must be a full time student at their high school or middle school.
Exception: Juniors and Seniors on graduation track may have a reduced schedule as long as the student is enrolled in 20 semester credits or otherwise satisfies CIF rules on enrollment.
- ii. Academic – Students maintain an overall GPA of 2.0, based on the most recent trimester, quarter or semester grade report. Students may be required to provide a periodic grade check when requested by the coach/advisor or athletic director.
- iii. All 8th grade students who matriculate to grade 9 are immediately scholastically eligible for participation in athletic activities upon enrollment in high school. Those students with less than a 2.0 GPA are placed on probationary status until the next grading period.
- iv. High school athletes planning to attend Division I colleges must be sure they have fulfilled the NCAA Clearinghouse Requirements (see school counselor for details).
- v. Students enrolled in an Independent Study Program must be residents of the district and be enrolled in an Independent Study Program supported through FCUSD. Students are responsible for contacting their school of residency. Students will be reviewed on a case by cases basis to determine eligibility.

3. Athletic Clearance

- i. No student will be allowed to practice or participate until
 - a. EVERY form is completed and verified by the athletic director (see list).
 - b. All school and athletic debts have been cleared.
 - c. All outstanding/checked-out athletic uniforms and/or equipment is returned.

4. Attendance

- i. Game/Event Day: Non attendance for any part of the school day may result in no participation in an event or athletic contest, unless prior approval is received from an administrator.

- ii. Practice: Students not attending school may not participate in practice or event on that day without prior approval from an administrator.

5. Behavior

- i. School Suspension: Any student who has been suspended for violating the FCUSD Student Code of Conduct during school hours, on the way to or from school, or at a school-sponsored event, will be suspended from the team for no less than the same time period as the school suspension. A formal hearing with an administrator, coach/advisor, and athletic director will be held to determine the length of suspension from the team and if the student may continue to participate in the activity.
- ii. Team Suspension – If a coach or advisor suspends a student, the student will be ineligible for participation in practice and games until a hearing with the administrator, coach/advisor, athletic director, parent and student is held to determine whether or not the student may remain on the team.
- iii. Citizenship – Students are expected to maintain excellent citizenship in conjunction with the CIF *Six Pillars of Character* as well as the *Victory with Honor* standards. These standards ensure outstanding athlete behavior in class and all school events.
- iv. Proper Uniforms – Athletes must wear uniforms or equipment as specified by the coach / athletic director, according to CIF rules.

Code of Conduct for Students and Parents

1. CIF Code of Conduct for Student Athletes

Interscholastic athletic competition should demonstrate high standards of ethics and sportsmanship and promote the development of good character and other important life skills. The highest potential of sports is achieved when participants are committed to *pursuing victory with honor* according to the Six Pillars of Character: *trustworthiness, respect, responsibility, fairness, caring, and good citizenship*. This code applies to all student-athletes involved in interscholastic sports throughout California. In order to participate in high school athletics, you must act in accordance with the following:

- i. **Trustworthiness**

Trustworthiness — Be worthy of trust in all you do.

Integrity — Live up to high ideals of ethics and sportsmanship and always pursue victory with honor. Do what's right even when it's unpopular or personally costly.

Honesty — Live and compete honorably. Don't lie, cheat, steal or engage in any other dishonest or unsportsmanlike conduct. Plagiarism or cheating is not acceptable.

Reliability — Fulfill commitments. Do what you say you will do. Be on time to practices and games.

Loyalty — Be loyal to your school and team. Put the team above personal glory.

- ii. **Respect**

Respect — Treat all people with respect all the time and require the same of other student-

athletes.

Class — Live and play with class; be a good sport; be gracious in victory and accept defeat with dignity; give fallen opponents help, compliment extraordinary performance, show sincere respect in pre- and post-game rituals.

Disrespectful Conduct — Don't engage in disrespectful conduct of any sort including profanity, obscene gestures, offensive remarks of a sexual or racial nature, trash-talking, taunting, boastful celebrations, or other actions that demean individuals or the sport.

Respect Officials — Treat contest officials with respect; don't complain about or argue with official calls or decisions during or after an athletic event.

iii. **Responsibility**

Importance of Education — Be a student first and commit to getting the best education I can. Be honest with myself about the likelihood of getting an athletic scholarship or playing on a professional level and remember that many universities will not recruit student-athletes that do not have a serious commitment to their education, the ability to succeed academically or the character to represent their institution honorably.

Role-Modeling — Remember, participation in sports is a privilege, not a right and that I am expected to represent my school, coach and teammates with honor, on and off the field. Consistently exhibit good character and conduct yourself as a positive role model. Suspension or termination of the participation privilege is within the sole discretion of the school administration.

Self-Control — Exercise self-control; don't fight or show excessive displays of anger or frustration; have the strength to overcome the temptation to retaliate.

Healthy Lifestyle — Safeguard your health; don't use any illegal or unhealthy substances including alcohol, tobacco and drugs or engage in any unhealthy techniques to gain, lose or maintain weight.

Integrity of the Game — Protect the integrity of the game; don't gamble. Play the game according to the rules.

iv. **Fairness**

Be Fair — Live up to high standards of fair play; be open-minded; always be willing to listen and learn.

v. **Caring**

Concern for Others — Demonstrate concern for others; never intentionally injure any player or engage in reckless behavior that might cause injury to myself or others.

Teammates — Help promote the well-being of teammates by positive counseling and encouragement or by reporting any unhealthy or dangerous conduct to coaches.

vi. **Citizenship**

Play by the Rules — Maintain a thorough knowledge of and abide by all applicable game and competition rules.

Spirit of Rules — Honor the spirit and the letter of rules; avoid temptations to gain competitive

advantage through improper gamesmanship techniques that violate the highest traditions of sportsmanship.

2. CIF Code of Conduct for Parents/Guardians

- i. The role of the parent in the education of a student is vital. The support shown in the home is often manifested in the ability of the student to accept the opportunities presented at school and in life.
- ii. There is a value system – established in the home, nurtured in the school – which young people are developing. Their involvement in classroom and other activities contributes to that development. Trustworthiness, Citizenship, Caring, Fairness and Respect are lifetime values taught through extra curricular activities. These are the principles of good sportsmanship and character. With them, the spirit of competition thrives; fueled by honest rivalry, courteous relations and graceful acceptance of the results.
- iii. As a parent of a student at our school, your goals should:
 - a. Realize that athletic activities are part of the educational experience and the benefits of involvement go beyond the final score of a game.
 - b. Encourage our students to perform their best as both an athlete and a student.
 - c. Participate in positive cheers that encourage our student athletes and discourage any cheers that taunt, intimidate or demean opponents, their fans and officials.
 - d. Learn and understand the rules of the game, and respect the officials who administer them.
 - e. Respect the task our coaches/advisors face as teachers and support them as they strive to educate; student athletes.
 - f. Respect our opponents as students and acknowledge them for striving to do their best.
 - g. Model dignity and sportsmanship under all circumstances.

3. Complaints or Concerns

- i. When a conflict or issue arises, it is important that it be addressed immediately and as directly as possible so that it can be promptly resolved. In an effort to establish and maintain clear lines of communication between the athletic department staff, student-athletes, and parents/guardians, coaching staff will establish a specific time and day to meet with athletes and/or parents as requested. **Athletes or Parents should NEVER confront a coach before, during or after a contest/game or practice.** If or/when a conflict or issue arises, the following process is in place to effectively address that.

Step 1- Student-Athlete Contacts Coach:

We encourage athletes to become their own advocates and to contact the coach regarding the conflict/issue as soon as possible. It is anticipated that the majority of concerns will be resolved at this step.

Step 2- Parent Contacts Coach:

If needed, a parent may contact the coach directly-but never before, during or after a game or practice. A parent should contact the coach by email or phone to set up an appropriate day and time to discuss their concern.

Step 3 Contact the Athletic Director:

In situations where a satisfactory solution is not reached through direct contact with the coach, the athlete and/or parent should contact the Athletic Director. The athlete and/or parent should inform the coach that this contact will be made. A meeting may be scheduled involving all concerned parties in an attempt to reach a satisfactory resolution. The Athletic Director will respond to athletes and/ or parents' concerns/issue in a timely manner.

Step 4: Contact the Vice Principal Overseeing Athletics:

If after meeting with the Athletic Director, there is still not a satisfactory resolution, the athlete and/or parent may contact the school's Vice Principal overseeing athletics. The athlete and/or parent should inform the Athletic Director that this contact will be made. While there is no guarantee that all parties will agree with the findings or resolution, a thorough, respectful airing of different viewpoints and experiences can lead to a more productive relationships and a clearer understanding moving forward.

Retribution is prohibited in the California Education Code. Students and parents must be confident that voicing an opinion or concern in a respectful manner and using the proper process, is free from penalty or retribution. The Athletic Director and coaches are required to ensure that after a student or parent raises an issue or concern, there shall be no "retribution" in any form within the Folsom Cordova Unified School District.

Awards/Uniform/Equipment

1. Awards and Award Ceremony

- i. Awards and end of season ceremonies are organized and managed by each individual site. A student/athlete must meet the following requirements before participating in award ceremony or banquet:
 - a. Complete the entire season, including post-season if applicable, in good standing.
 - b. All equipment returned.
 - c. All school and athletic debts cleared.

2. Equipment/Uniform

- i. Students are responsible for the security of their equipment and uniforms. In some cases, particularly with game uniforms, the replacement fee may be higher than the original purchase price because special processing and printing may be required to duplicate the uniform.

- ii. Students are expected to turn in the same piece(s) of equipment checked out to them. They will be fined if they do not return the same pieces of equipment /uniforms that were issued to them.
- iii. Equipment should be returned in the same condition as it was received. Equipment and uniforms should be cleaned and washed before being returned. Students are expected to make arrangements to have torn or ripped clothing repaired prior to turning it into the coach.

Discipline

1. Discipline Consequences

- i. Athletes are to conform to FCUSD's Board Policies (BP) and Administrative Regulations (AR) as stated in the Student Code of. A student who has been suspended from school for violating the Student Code of Conduct will be suspended from any practices/games occurring during that same period of time (Bullying BP & AR 5131.2; Alcohol & Other Drugs BP & AR 5131.6; Tobacco BP & AR 5131.62; Steroids BP & AR 5131.63).
- ii. In addition to the district expectations for student conduct, each coach has the authority and responsibility, with the approval of the Athletic Director and school Principal, to establish his/her own rules and standards of behavior as they apply to his/her sport. All team rules must be in writing and clearly communicated to each team member and parent(s) at the beginning of the season. Coaches have the right to suspend or dismiss participants for conduct considered detrimental to the team or school. To assure that such decisions by individual coaches are reasonably just and fair, any decision can be appealed following the appeals process. Any serious discipline issues that occur will be handled by the principal.

2. Appeals Process:

- i. Any student who feels unjustly dismissed from any athletic team has the right to appeal. They may appeal to the Athletic Director, Administrator, and finally, to the Superintendent's designee. In order to appeal, they must do the following:
 - a. Present a written appeal to the Athletic Director within one week of dismissal.
 - b. Attend an informal hearing with the Athletic Director and site Administrator, where a final decision will be made to resolve the issue.
 - c. If the problem remains unresolved, a formal complaint may be filed with the Superintendent's designee and a formal hearing may be scheduled.

Transportation

3. Transportation

- i. The district provides transportation to almost all away events/games. Students are expected to

- ride to and from events/games on district provided transportation.
- a. FCUSD Transportation Department and the associated league/conference often determine bus departure times.
 - b. At the coach/advisor's discretion, students may be signed off the return bus by the parent/guardian. At the event, the parent/guardian must sign the *Release Sign-Out Sheet* stating their intention to drive their child home, releasing the district from liability. If the student will be riding home with another adult, the *Alternate Transportation Release Form* must be on file indicating the appropriate drivers and the *Release Sign-Out Sheet* must be signed by the appropriate driver.
 - c. All students will dress in an appropriate manner for bus trips as determined by coach/advisor.
 - d. Personal items are the responsibility of the students. Personal electronic devices may be allowed at the coach/advisor's discretion.
- ii. On rare occasions when a bus is not available for an off campus game/event, a coach/advisor may make arrangements for parent drivers. However, these parent drivers must sign a *Volunteer Personal Auto Use Form* **and** be cleared as a Volunteer Category 2. See the Volunteer Category 2 Requirements on your school's website.
- iii. Only under certain circumstances will approval be granted for a student to drive their own vehicle to and/or from a game/event. The coach/advisor must receive advance notice from the parent/guardian of their request. Requests will be considered on a case by case base. All applicable forms must be completed and on file prior to the game/event including, an *Alternate Student Transportation Form* (signed by parent, student, and coach/advisor), and a *Student Personal Auto Form* (signed by parents and student). **IMPORTANT-** if the request is approved, **no** additional students are permitted to be in the vehicle.

District Nondiscrimination and Harassment Policy

Nondiscrimination

The Governing Board is committed to providing equal opportunity for all individuals in education. District programs, activities, and practices shall be free from discrimination based on race, color, ancestry, national origin, ethnic group identification, age, religion, marital or parental status, physical or mental disability, sex, sexual orientation, gender, gender identity or expression, or genetic information; the perception of one or more of such characteristics; or association with a person or group with one or more of these actual or perceived characteristics.

The Superintendent or designee shall review district programs and activities to ensure the removal of any barrier that may unlawfully prevent an individual or group in any of the protected categories stated above from accessing district programs and activities, including the use of facilities. He/she shall take prompt, reasonable actions to remove any identified barrier.

Bullying

The Governing Board believes that all students have the right to be educated in a positive learning environment free from disruptions. Students shall be expected to exhibit appropriate conduct that does not infringe upon the rights of others or interfere with the school program while on school grounds, while going to or coming from school, while at school activities, and while on district transportation. Prohibited student conduct includes, but is not limited to harassment of students or staff, including bullying, intimidation, cyber bullying, hazing or initiation activity, ridicule, extortion, or any other verbal, written, or physical conduct that causes or threatens to cause bodily harm or emotional suffering. BP 5131

Sexual Harassment

The Governing Board is committed to maintaining a learning environment that is free of harassment. Board Policy 5145.7 prohibits the unlawful sexual harassment of any student by any employee, student, or other person at school or at any school-related activity. The District is committed to taking serious, immediate and appropriate action with respect to violations of sexual harassment policy. Students shall be assured that they need not endure any form of sexual harassment. They shall further be assured that they need not endure, for any reason, any harassment that impairs the educational environment or a student's emotional well being at school. Should a student believe that he/she has been subjected to sexual harassment, he/she shall file a complaint in accordance with the guidelines outlined under the Uniform Complaint Procedures. Students can be assured that the District will not tolerate retaliation as a result of the filing of a complaint. Any student who engages in the sexual harassment of anyone at school or a school related activity shall be subject to disciplinary action.

Uniform Complaint Procedure

It is the goal of the Folsom Cordova Unified School District to ensure compliance with applicable state and federal laws and regulations governing educational programs. The District shall follow the Uniform Complaint Procedure when addressing complaints alleging unlawful discrimination on the basis of actual or perceived ancestry, color, ethnic group identification, national origin, race, religion, sex, gender (including sexual harassment), sexual orientation, or physical and/or mental disability in any program or activity that receives or benefits from state financial assistance or for the alleged failure to comply with state or federal law when addressing complaints regarding adult basic education, consolidated categorical aid programs, migrant education, vocational education, child care and development programs, child nutrition programs and special education programs. More detailed information regarding the Uniform Complaint Procedure is contained in the Folsom Cordova Unified School District Parent's Rights and Responsibilities Handbook. If you have questions regarding the Uniform Complaint Procedure, please contact the Human Resources department at (916) 294-9002.

Acknowledgment of Athletic Handbook Form

Name _____ List Sport(s) _____
(Last) (First)

Birth Date ____/____/____ Age ____ Grade ____ Female Male

Parent / Guardian Name: Father _____ Mother _____

Cell Phone Number: Father _____ Mother _____

Father Email _____@_____

Mother Email _____@_____

Home Address _____ City _____ Zip _____

Have you ever been enrolled and attended another high school even for one day? Yes No

Consent Statements – Please read carefully and sign below.

- ❖ I hereby give my consent for the above-named student to participate in athletics/extra curricular activities.
- ❖ I hereby give my consent for the above-named student to have his/her picture and/or statistics published. This may include print/electronic media.
- ❖ I hereby authorize the FCUSD or a representative to transport and supervise the above-named student on any trip.
- ❖ I hereby give my consent, in case this student is injured or becomes ill, for the school and/or its representative to secure medical aid, ambulance transportation, and for the medical agency to render treatment.
- ❖ I hereby give my consent to the team physician, emergency doctor, nurse, athletic trainer, teacher and/or coach to apply first aid treatment until the family doctor can be contacted.
- ❖ I, as a student athlete, have read and will adhere to the Code of Conduct for Interscholastic Student Athletes.
- ❖ I, as a parent/guardian, have read and will adhere to the Code of Conduct for parents/guardians.
- ❖ I understand there is a Transportation Fee for each sport that the student participates.

WE HAVE READ AND UNDERSTAND ALL OF THE RESPONSIBILITIES AS OUTLINED IN BOTH THE STUDENT/PARENT HANDBOOK AND ANY ADDITIONAL GUIDELINES (If applicable) ATTACHED BY THE COACH OR TEACHER.

_____	_____
Parent/Guardian Signature	Date
_____	_____
Student Signature	Date



AGREEMENT FOR TEAM PARTICIPATION

[Including Waivers and Releases of Potential Claims and Statement of Other Obligations]

All sections of this Agreement must be completed, with the signed original delivered to the School Office, before a Student will be allowed to participate in any manner in the Team Activities defined below. A separate Agreement is required for each Team in which the Student may participate.

Name of Student	Address:
Grade:	DOB:
School:	Telephone:
Team:	

In consideration for the Student’s ability to participate on the Team [including any Sport, Cheerleading, Dance, or Marching Band], including try outs for the Team, participation in Team practices or training sessions, the receiving of coaching, training, or direction, the participation in Team events, shows, performances, or competitions, or the traveling to and from any of the foregoing activities (“Team Activities”), the Student and the Parent or Legal Guardian (“Adult”) signing this Agreement agree as follows:

1. It is a privilege, not a right, to participate in extra-curricular activities, including Team Activities. The privilege may be revoked at any time, for any reason, that does not violate Federal, State or District laws, policies or procedures. There is no guarantee that the Student will make the Team, remain on the Team, or actively participate in Team events, shows, performances, or competitions. Such matters shall remain exclusively within the judgment and discretion of the District and its employees.

2. The Student and the Adult understand the nature of the Team, including the inherent or potential risks of Team Activities. The Student is in sufficiently good health and physical condition to participate in Team Activities, and voluntarily wishes to participate in Team Activities. Before participating in a Team Activity, a medical clearance shall be submitted (valid for one calendar year), signed by a licensed physician, or physician-supervised and authorized nurse practitioner or physician’s assistant, stating that the Student has been physically examined and is deemed to be in sufficiently good health and fitness so that the Student may fully participate in Team Activities.

3. The Student shall comply with the instruction and directions of Team Activity teachers, coaches, supervisors, chaperones, and instructors. During the Student’s participation in Team Activities, as well as academic and/or other school activities, the Student shall comply with all applicable Codes of Conduct. The Student shall also generally conduct himself/herself at all times in keeping with the highest moral and ethical standards so as to reflect positively on himself/herself, the Team and the District. Failure to meet these obligations may, in the discretion of the District, result in immediate removal from Team Activities and a prohibition against any future involvement in Team Activities or other extra-curricular activities. Should the violation of these obligations also result in bodily injury or property damage during a Team Activity, the Adult will (a) pay to restore or replace any property damaged as a result of the Student’s violation, (b) pay any damages caused to bodily injury to an individual, and (c) defend, protect and hold the District harmless from such property damage or bodily injury claims.

4. Team Activities contain potential risks of harm or injury, including harm or injury that may lead to permanent and serious physical injury to the Student, including paralysis, brain injury, or death (“Injuries”) Injuries might arise from the Student’s actions or inactions, the actions or inactions of another Student or participant in a Team Activity, or the actual or alleged failure by District employees, agents or volunteers to adequately coach, train, instruct, or supervise Team Activities. Injuries might also arise from an actual or alleged failure to properly maintain, use, repair, or replace physical facilities or equipment available for Team Activities. Injuries might also arise from undiagnosed, improperly diagnosed, untreated, improperly treated, or untimely treated actual or potential Injuries, whether or not caused by the Student’s participation in Team Activities. All such risks are deemed to be inherent to the Student’s participation in Team Activities. By this Agreement, the Student and Adult are deemed to fully assume all such risks and, in consideration for the right of the Student to participate in Team Activities, understand and agree that to the fullest extent allowed by law they are waiving and releasing any potential future claim they might otherwise have been able assert against the District, or any Board Member, employee, agent or volunteer of the District (“Released Parties”) by or on behalf of the Student or any parent, administrator, executor, trustee, guardian, assignee or family member, and further understand that transportation to or activities at another location are “field trips” or “excursions” for which there is complete immunity pursuant to Education Code § 35330.

5. If the Student believes that an unsafe condition or circumstance exists, or otherwise feels or believes that continued participation in Team Activities might present a risk of Injury, the Student will immediately discontinue further participation in Team Activities, notify School personnel of the Student’s belief, and notify a parent or guardian of the Student’s belief. Any parent or guardian of the Student shall, thereafter, not allow the Student to participate in Team Activities until the unsafe condition or circumstance is remedied, with any question or concern regarding the alleged existence of the unsafe condition or circumstance addressed to their satisfaction.

6. Emergency medical information regarding the Student is on file with the District and is current. The Adult agrees to provide updated medical information during the course of the Student’s participation in Team Activities. If an injury or medical emergency



FOLSOM CORDOVA UNIFIED SCHOOL DISTRICT

Athletic/Extra Curricular Participation

EMERGENCY INFORMATION

Student Name: _____

Grade: _____ Birth Date: _____ Age: _____

Parent/Guardian Name: _____

Address: _____

Home Phone: _____

Father's Cell Phone: _____ Father's Email: _____

Mother's Cell Phone: _____ Mother's Email: _____

In an emergency if parents cannot be contacted, please notify:

Name: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____

In emergency cases, do you give permission for the team physician, trainer, and/or coach to apply first aid treatment until the family doctor can be contacted? Yes No

Family Doctor: _____ Phone Number: _____

Student's Insurance Company: _____

HEALTH HISTORY	YES	NO
Kidney Injuries		
Heart Condition or Disease		
Diabetes		
Asthma		
Allergic to Bee Stings		

DATE OF LAST TETNUS SHOT:

Does student carry an inhaler? Yes No

While competing does the student wear:

Glasses		
Contacts		
Knee or Ankle Brace Required		

Other medical conditions not listed above: _____

Allergies to medications or other: _____

School Use Only:

Student is academically eligible and has a 2.0 GPA or above: Yes No

Student was cleared to participate in athletics on _____, 20____

Signature: _____ Name: _____



AGREEMENT NOT TO USE PERFORMANCE ENHANCING DRUGS (Including Authorization for Drug Testing as Allowed by Law)

Student Name _____ Birthdate _____

School _____ Grade _____

As a condition of membership in the California Interscholastic Federation (“CIF”), the District was required to adopt policies that prohibit the use and abuse of androgenic/anabolic steroids. (CIF By-Law 523). Failure to comply with these policies can result in CIF suspending the sport from competitions and/or imposing other fines or consequences. In order to comply with CIF and District requirements, the student athlete and at least one parent/legal guardian must sign this Agreement Not to Use Performance Enhancing Drugs, noting their compliance with the following requirements.

1. The student shall not use androgenic/anabolic steroids, human growth hormone, erythropoietin (EPO), beta-blockers, stimulants, or diuretics except when under the care of a licensed physician who has issued a current prescription to the student for such drugs in response to an identified medical condition.
2. The student shall not possess or distribute androgenic/anabolic steroids, human growth hormone, erythropoietin (EPO), beta-blockers, stimulants or diuretics at any time. If the student has a prescription for such medications, he/she shall follow the District’s Medication Management Policies and Procedures.
3. If a student is found to have used, possessed or distributed androgenic/anabolic steroids, human growth hormone, erythropoietin (EPO), beta-blockers, stimulants or diuretics not in keeping with these requirements, the student will face potential immediate suspension from the team and may face further discipline, up to and including suspension or expulsion from school. If the student becomes aware of facts indicating that another student has violated these rules, the student shall immediately notify the head coach, the school principal, or the athletic director.
4. If there is an allegation that the student has violated these policies, the District is authorized to conduct an oral or urine test, as may be appropriate, to test for prohibited substances. The District is also authorized, as allowed by law, to conduct random drug tests, which would include tests intended to determine the presence of these substances, as well as other drugs (marijuana, cocaine, methamphetamines, etc.), the use of which by students is barred by law and District policy. All such testing will be at the cost of the District, with a copy of the results mailed to the parent/legal guardian. Any positive drug test result may result in discipline as authorized by District policy.

Signature/Student: _____ Date: _____

Signature/Parent/Guardian _____ Date: _____



Concussion Information Sheet

Why am I getting this information sheet?

You are receiving this information sheet about concussions because of California state law AB 25 (effective January 1, 2012), now Education Code § 49475:

1. *The law requires a student athlete who may have a concussion during a practice or game to be removed from the activity for the remainder of the day.*
2. *Any athlete removed for this reason must receive a written note from a medical doctor trained in the management of concussion before returning to practice.*
3. *Before an athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the school by the athlete and the parent or guardian.*

Every 2 years all coaches are required to receive training about concussions (AB 1451), as well as certification in First Aid training, CPR, and AEDs (life-saving electrical devices that can be used during CPR).

What is a concussion and how would I recognize one?

A concussion is a kind of brain injury. It can be caused by a bump or hit to the head, or by a blow to another part of the body with the force that shakes the head. Concussions can appear in any sport, and can look differently in each person.

Most concussions get better with rest and over 90% of athletes fully recover. However, all concussions should be considered serious. If not recognized and managed the right way, they may result in problems including brain damage and even death.

Most concussions occur without being knocked out. Signs and symptoms of concussion (see back of this page) may show up right after the injury or can take hours to appear. If your child reports any symptoms of concussion or if you notice some symptoms and signs, seek medical evaluation from your team's athletic trainer and a medical doctor trained in the evaluation and management of concussion. If your child is vomiting, has a severe headache, or is having difficulty staying awake or answering simple questions, call 911 to take him or her immediately to the emergency department of your local hospital.

On the CIF website is a **Graded Concussion Symptom Checklist**. If your child fills this out after having had a concussion, it helps the doctor, athletic trainer or coach understand how he or she is feeling and hopefully shows improvement. We ask that you have your child fill out the checklist at the start of the season even before a concussion has occurred so that we can understand if some symptoms such as headache might be a part of his or her everyday life. We call this a "baseline" so that we know what symptoms are normal and common for your child. Keep a copy for your records, and turn in the original. If a concussion occurs, he or she should fill out this checklist daily. This Graded Symptom Checklist provides a list of symptoms to compare over time to make sure the athlete is recovering from the concussion.

What can happen if my child keeps playing with concussion symptoms or returns too soon after getting a concussion?

Athletes with the signs and symptoms of concussion should be removed from play immediately. There is NO same day return to play for a youth with a suspected concussion. Youth athletes may take more time to recover from concussion and are more prone to long-term serious problems from a concussion.

Even though a traditional brain scan (e.g., MRI or CT) may be "normal", the brain has still been injured. Animal and human research studies show that a second blow before the brain has recovered can result in serious damage to the brain. If your athlete suffers another concussion before completely recovering from the first one, this can lead to prolonged recovery (weeks to months), or even to severe brain swelling (Second Impact Syndrome) with devastating consequences.

There is an increasing concern that head impact exposure and recurrent concussions may contribute to long-term neurological problems. One goal of this concussion program is to prevent a too early return to play so that serious brain damage can be prevented.

Signs observed by teammates, parents and coaches include:

- | | |
|--|---|
| <ul style="list-style-type: none">• Looks dizzy• Looks spaced out• Confused about plays• Forgets plays• Is unsure of game, score, or opponent• Moves clumsily or awkwardly• Answers questions slowly | <ul style="list-style-type: none">• Slurred speech• Shows a change in personality or way of acting• Can't recall events before or after the injury• Seizures or has a fit• Any change in typical behavior or personality• Passes out |
|--|---|

Symptoms may include one or more of the following:

- | | |
|--|--|
| <ul style="list-style-type: none">• Headaches• "Pressure in head"• Nausea or throws up• Neck pain• Has trouble standing or walking• Blurred, double, or fuzzy vision• Bothered by light or noise• Feeling sluggish or slowed down• Feeling foggy or groggy• Drowsiness• Change in sleep patterns | <ul style="list-style-type: none">• Loss of memory• "Don't feel right"• Tired or low energy• Sadness• Nervousness or feeling on edge• Irritability• More emotional• Confused• Concentration or memory problems• Repeating the same question/comment |
|--|--|

What is Return to Learn?

Following a concussion, student athletes may have difficulties with short- and long-term memory, concentration and organization. They will require rest while recovering from injury (e.g., avoid reading, texting, video games, loud movies), and may even need to stay home from school for a few days. As they return to school, the schedule might need to start with a few classes or a half-day depending on how they feel. If recovery from a concussion is taking longer than expected, they may also benefit from a reduced class schedule and/or limited homework; a formal school assessment may also be necessary. Your school or doctor can help suggest and make these changes. Student athletes should complete the Return to Learn guidelines and return to complete school before beginning any sports or physical activities, unless your doctor makes other recommendations. Go to the CIF website (cifstate.org) for more information on Return to Learn.

How is Return to Play (RTP) determined?

Concussion symptoms should be completely gone before returning to competition. A RTP progression involves a gradual, step-wise increase in physical effort, sports-specific activities and the risk for contact. If symptoms occur with activity, the progression should be stopped. If there are no symptoms the next day, exercise can be restarted at the previous stage.

RTP after concussion should occur only with medical clearance from a medical doctor trained in the evaluation and management of concussions, and a step-wise progression program monitored by an athletic trainer, coach, or other identified school administrator. Please see cifstate.org for a graduated return to play plan. *[AB 2127, a California state law effective 1/1/15, states that return to play (i.e., full competition) must be **no sooner** than 7 days after the concussion diagnosis has been made by a physician.]*

Final Thoughts for Parents and Guardians:

It is well known that high school athletes will often not talk about signs of concussions, which is why this information sheet is so important to review with them. Teach your child to tell the coaching staff if he or she experiences such symptoms, or if he or she suspects that a teammate has had a concussion. You should also feel comfortable talking to the coaches or athletic trainer about possible concussion signs and symptoms that you may be seeing in your child.

References:

- American Medical Society for Sports Medicine position statement: concussion in sport (2013)
- Consensus statement on concussion in sport: the 4th International Conference on Concussion in Sport held in Zurich, November 2012
- <http://www.cdc.gov/concussion/HeadsUp/youth.html>

Concussion Information Sheet

Please Return this Page

I hereby acknowledge that I have received the Concussion Information Sheet from my school and I have read and understand its contents. I also acknowledge that if I have any questions regarding these signs, symptoms and the "Return to Learn" and "Return to Play" protocols I will consult with my physician.

Student-athlete Name Printed

Student-athlete Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date

Keep Their Heart in the Game

A Sudden Cardiac Arrest Information Sheet for Athletes and Parents/Guardians

What is sudden cardiac arrest?

Sudden cardiac arrest (SCA) is when the heart stops beating, suddenly and unexpectedly. When this happens blood stops flowing to the brain and other vital organs. SCA is NOT a heart attack. A heart attack is caused by a blockage that stops the flow of blood to the heart. SCA is a malfunction in the heart's electrical system, causing the victim to collapse. The malfunction is caused by a congenital or genetic defect in the heart's structure.

How common is sudden cardiac arrest in the United States?

As the leading cause of death in the U.S., there are more than 300,000 cardiac arrests outside hospitals each year, with nine out of 10 resulting in death. Thousands of sudden cardiac arrests occur among youth, as it is the #2 cause of death under 25 and the #1 killer of student athletes during exercise.

Who is at risk for sudden cardiac arrest?

SCA is more likely to occur during exercise or physical activity, so student-athletes are at greater risk. While a heart condition may have no warning signs, studies show that many young people do have symptoms but neglect to tell an adult. This may be because they are embarrassed, they do not want to jeopardize their playing time, they mistakenly think they're out of shape and need to train harder, or they simply ignore the symptoms, assuming they will "just go away." Additionally, some health history factors increase the risk of SCA.

FAINTING
is the
#1 SYMPTOM
OF A HEART CONDITION

What should you do if your student-athlete is experiencing any of these symptoms?

We need to let student-athletes know that if they experience any SCA-related symptoms it is crucial to alert an adult and get follow-up care as soon as possible with a primary care physician. If the athlete has any of the SCA risk factors, these should also be discussed with a doctor to determine if further testing is needed. Wait for your doctor's feedback before returning to play, and alert your coach, trainer and school nurse about any diagnosed conditions.

What is an AED?

An automated external defibrillator (AED) is the only way to save a sudden cardiac arrest victim. An AED is a portable, user-friendly device that automatically diagnoses potentially life-threatening heart rhythms and delivers an electric shock to restore normal rhythm. Anyone can operate an AED, regardless of training. Simple audio direction instructs the rescuer when to press a button to deliver the shock, while other AEDs provide an automatic shock if a fatal heart rhythm is detected. A rescuer cannot accidentally hurt a victim with an AED—quick action can only help. AEDs are designed to only shock victims whose hearts need to be restored to a healthy rhythm. Check with your school for locations of on-campus AEDs.



The Cardiac Chain of Survival

On average it takes EMS teams up to 12 minutes to arrive to a cardiac emergency. Every minute delay in attending to a sudden cardiac arrest victim decreases the chance of survival by 10%. Everyone should be prepared to take action in the first minutes of collapse.

Early Recognition of Sudden Cardiac Arrest



Collapsed and unresponsive.
Gasping, gurgling, snorting, moaning or labored breathing noises.
Seizure-like activity.

Early Access to 9-1-1



Confirm unresponsiveness.
Call 9-1-1 and follow emergency dispatcher's instructions.
Call any on-site Emergency Responders.

Early CPR



Begin cardiopulmonary resuscitation (CPR) immediately. Hands-only CPR involves fast and continual two-inch chest compressions—about 100 per minute.

Early Defibrillation



Immediately retrieve and use an automated external defibrillator (AED) as soon as possible to restore the heart to its normal rhythm. Mobile AED units have step-by-step instructions for a bystander to use in an emergency situation.

Early Advanced Care



Emergency Medical Services (EMS) Responders begin advanced life support including additional resuscitative measures and transfer to a hospital.

Keep Their Heart in the Game

Recognize the Warning Signs & Risk Factors of Sudden Cardiac Arrest (SCA)

Tell Your Coach and Consult Your Doctor if These Conditions are Present in Your Student-Athlete

Potential Indicators That SCA May Occur

- Fainting or seizure, especially during or right after exercise
- Fainting repeatedly or with excitement or startle
- Excessive shortness of breath during exercise
- Racing or fluttering heart palpitations or irregular heartbeat
- Repeated dizziness or lightheadedness
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise

Factors That Increase the Risk of SCA

- Family history of known heart abnormalities or sudden death before age 50
- Specific family history of Long QT Syndrome, Brugada Syndrome, Hypertrophic Cardiomyopathy, or Arrhythmogenic Right Ventricular Dysplasia (ARVD)
- Family members with unexplained fainting, seizures, drowning or near drowning or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs, such as cocaine, inhalants, "recreational" drugs, excessive energy drinks or performance-enhancing supplements

What is CIF doing to help protect student-athletes?

CIF amended its bylaws to include language that adds SCA training to coach certification and practice and game protocol that empowers coaches to remove from play a student-athlete who exhibits fainting—the number one warning sign of a potential heart condition. A student-athlete who has been removed from play after displaying signs or symptoms associated with SCA may not return to play until he or she is evaluated and cleared by a licensed health care provider. Parents, guardians and caregivers are urged to dialogue with student-athletes about their heart health and everyone associated with high school sports should be familiar with the cardiac chain of survival so they are prepared in the event of a cardiac emergency.

I have reviewed and understand the symptoms and warning signs of SCA and the new CIF protocol to incorporate SCA prevention strategies into my student's sports program.

STUDENT-ATHLETE SIGNATURE

PRINT STUDENT-ATHLETE'S NAME

DATE

PARENT/GUARDIAN SIGNATURE

PRINT PARENT/GUARDIAN'S NAME

DATE

For more information about Sudden Cardiac Arrest visit

California Interscholastic Federation
<http://www.cifstate.org>

Eric Paredes Save A Life Foundation
<http://www.epsavealife.org>

National Federation of High Schools
(20-minute training video)
<https://nfhslearn.com/courses/61032>



Folsom Cordova Unified School District - SPORTS PHYSICAL EXAMINATION FORM

PART 1 (TO BE COMPLETED BY A PARENT OR LEGAL GUARDIAN)

LAST NAME		FIRST NAME		GRADE
BIRTHDATE	FALL SPORT	WINTER SPORT	SPRING SPORT	STUDENT ID NUMBER

HEALTH HISTORY (Must be Completed Prior to the Examination)

	Yes	No	Has this student had any:	Yes	No	Does this student:	
1.	<input type="checkbox"/>	<input type="checkbox"/>	Chronic or recurrent illness?	16.	<input type="checkbox"/>	<input type="checkbox"/>	Wear eyeglasses or contact lenses?
2.	<input type="checkbox"/>	<input type="checkbox"/>	Illness lasting over 1 week?	17.	<input type="checkbox"/>	<input type="checkbox"/>	Wear dental bridges, braces or plates?
3.	<input type="checkbox"/>	<input type="checkbox"/>	Hospitalizations or Surgery?	18.	<input type="checkbox"/>	<input type="checkbox"/>	Take any medications? (List below):
4.	<input type="checkbox"/>	<input type="checkbox"/>	Nervous, psychiatric, or neurologic condition?				
5.	<input type="checkbox"/>	<input type="checkbox"/>	Loss or nonfunctioning of organs (eye, kidney, liver, testicle) or glands?	Yes	No	Is there any history of:	
6.	<input type="checkbox"/>	<input type="checkbox"/>	Allergies (medicines, insect bites, food)?	19.	<input type="checkbox"/>	<input type="checkbox"/>	Injuries requiring medical care or treatment?
7.	<input type="checkbox"/>	<input type="checkbox"/>	Problems with heart or blood pressure?	20.	<input type="checkbox"/>	<input type="checkbox"/>	Neck or back pain or injury?
8.	<input type="checkbox"/>	<input type="checkbox"/>	Chest pain or severe shortness of breath with exercise?	21.	<input type="checkbox"/>	<input type="checkbox"/>	Knee pain or injury?
9.	<input type="checkbox"/>	<input type="checkbox"/>	Dizziness or fainting with exercise?	22.	<input type="checkbox"/>	<input type="checkbox"/>	Shoulder or elbow pain or injury?
10.	<input type="checkbox"/>	<input type="checkbox"/>	Fainting, bad headaches or convulsions?	23.	<input type="checkbox"/>	<input type="checkbox"/>	Ankle pain or injury?
11.	<input type="checkbox"/>	<input type="checkbox"/>	Concussion or loss of consciousness?	24.	<input type="checkbox"/>	<input type="checkbox"/>	Other joint pain or injury?
12.	<input type="checkbox"/>	<input type="checkbox"/>	Heat exhaustion, heatstroke, or other problems with heat?	25.	<input type="checkbox"/>	<input type="checkbox"/>	Broken bones (fractures)?
13.	<input type="checkbox"/>	<input type="checkbox"/>	Racing heart, skipped, irregular heartbeats, or heart murmur?	Yes	No	Further history:	
14.	<input type="checkbox"/>	<input type="checkbox"/>	Seizures?	26.	<input type="checkbox"/>	<input type="checkbox"/>	Birth defects (corrected or not)?
15.	<input type="checkbox"/>	<input type="checkbox"/>	Severe or repeated instances of muscle cramps?	27.	<input type="checkbox"/>	<input type="checkbox"/>	Death of parent or grandparent less than 40 years of age due to medical cause or condition?
Date of last known tetanus (lockjaw) shot: _____				28.	<input type="checkbox"/>	<input type="checkbox"/>	Parent or grandparent requiring treatment for heart condition less than 50 years of age
Date of last complete physical examination: _____				29.	<input type="checkbox"/>	<input type="checkbox"/>	Been seen by a physician on an emergency or urgent basis in the last 12-months?

Explain all "YES" answers here along with any other fact or circumstance that should be disclosed prior to the examination (use reverse of form if needed):

PARENT/GUARDIAN'S AUTHORIZATION: I authorize a physician or duly authorized and supervised physician's assistant or nurse practitioner to perform a Sports Physical Evaluation on the student. The information set forth above is complete and accurate and I know of no reason why the student cannot fully and safely participate in the listed sports. I understand that this is solely a screening examination and that the absence of any health conditions or concerns listed below does not mean that student is free from actual or potential harmful health conditions that may cause the student injury or death while participating in sports. Any question or concern I may have regarding the student's health or safety will be referred to our personal physician or health care provider for review and evaluation.

PRINT NAME OF PARENT OR GUARDIAN		SIGNATURE OF PARENT OR GUARDIAN		
ADDRESS		WORK PHONE	HOME PHONE	DATE
REGULAR PHYSICIAN'S NAME		OFFICE PHONE		

PART 2 (TO BE COMPLETED BY THE EXAMINING PHYSICIAN/PHYSICIAN'S ASSISTANT/NURSE PRACTITIONER)

	NORMAL	ABNORMAL (Describe)	
Eyes/Ears/Nose/Throat			Height:
Skin			Weight:
Heart			Pulse: After Ex:
Abdomen			BP:
Genital/hernia (males)			Recommendation: <input type="checkbox"/> Unlimited participation <input type="checkbox"/> Limited participation/specific sports, events or activities <input type="checkbox"/> Clearance withheld pending further testing/evaluation <input type="checkbox"/> No athletic participation One of the above <i>MUST</i> be checked.
Musculoskeletal:			
a. Neck/Spine/Shoulders/Back			
b. Arms/Hands/Fingers			
c. Hips/Thighs/Knees/Legs			
d. Feet/Ankles			
Neurologic Screening Exam (NSE)			

Comments:

PRINT NAME OF PHYSICIAN (M.D., D.O., P.A. or N.P. only)	PHYSICIAN'S SIGNATURE	DATE
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STUDENT ALTERNATE TRANSPORTATION FORM

Students participating in off-campus District-sponsored activities, including, but not limited to, practices, games, meetings, competitions, and conferences (“Events”), are required to travel on school buses or by other District-designated methods of transportation. Under special circumstances, with the District’s prior written approval, Students may be transported to and from Events (a) by a parent/guardian or other designated adult, or (2) by himself/herself. Under no circumstances may Students be transported in a vehicle driven by another student or anyone under 21 years of age.

Before the District grants a request for alternate transportation, this Student Alternate Transportation Form must be submitted to the School Office after it has been signed by the Student, the Student’s parent/ legal guardian, and the District employee supervising the Event. Before the Student Alternate Transportation Form will be accepted and approved by the School Office, the individual who will transport the Student must also complete and file with the School Office an acceptable (a) Personal Automobile Use Form (for parents/ guardians/designated adults) or (b) Student Personal Automobile Use Form (if the Student intends to drive himself/herself to Events).

If the required Forms are not submitted to and accepted by the School Office 48-hours before an Event, the Student must be transported to and from the Event through normal District-sponsored methods. A Student not complying with these provisions will not be allowed to attend or participate in the Event.

Name of Student:	
Event(s): Each approved Event or series of Events must be listed:	
Date(s):	
Reason for Request:	
Name of Designated Driver(s): Student and/or Designated Adult(s)	

I/we agree that the designated drivers and vehicles to be used are not covered under the District’s automobile liability coverage. The Student, his/her parent(s)/guardian(s), and/or the driver of the vehicle are solely responsible for damage or injury to others. I/we also agree that the Student and anyone else in the vehicle assume their own risk of harm, injury or death arising from this choice for alternate transportation. The Student, his/her parent(s)/legal guardian(s), and/or the vehicle driver further agree to hold the District and its officers, employees and volunteers free from any liability arising from this alternate transportation, agreeing also to defend and indemnify them against any resulting claim.

_____ **Printed Name of Student** _____ **Signature** _____ **Date**

_____ **Printed Name of Parent/Guardian** _____ **Signature** _____ **Date**

_____ **Printed Name of Supervising Employee** _____ **Signature** _____ **Date**

Date Received by District:	Received/Approved by:
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STUDENT PERSONAL AUTOMOBILE USE FORM



Students participating in off-campus District-sponsored activities, including, but not limited to, practices, games, meetings, competitions, and conferences (“Events”), are required to travel on school buses or by other District-designated methods of transportation. At the District’s sole discretion, after a separate Student Alternate Transportation Form has been properly executed, Students may transport themselves to and from designated activities. Before District authority is granted to the Student to drive to and from District-sponsored events, this Form and its required information must be completed and accepted by the School Office. The District’s permission for the Student to drive to and/or from District-sponsored activities may be revoked or limited at any time, for any reason.

REQUIRED INFORMATION

Name of Student Driver:	
Calif. Driver’s License No. & Exp. Date:	
Any License Restrictions:	
Vehicle(s) to be Driven - Year/Make/Model:	
Vehicle(s) License Plate No(s).:	
Insurance Carrier:	
Policy Number and Expiration Date:	
Liability Coverage Limits:	

With this Form, you must also provide a photocopy of (a) the Student’s Driver’s license, and (b) the Insurance Policy Declarations Page showing that coverage exists for the Student and the vehicle to be driven. Should the Student’s Driver’s License or the Insurance Policy expire during the school year, updated photocopies showing renewal are required before the Student will again be eligible to transport himself/herself to District-sponsored activities.

Neither the Student nor the Student’s vehicle is covered under the District’s automobile liability coverage. By signing this Form, you agree that the Student and his/her parent(s)/legal guardian(s) are solely responsible for any resulting damage or injury to others. You also agree that the Student and his/her parent(s)/legal guardian(s) assume the risk of harm, injury or death to the Student or others, and that by voluntarily allowing the Student to operate his/her own vehicle, the Student and his/her parent(s)/legal guardian(s) will hold the District and its officers and employees free from all liability.

For the safety of our Students, in signing below, you are also agreeing to the following rules and requirements:

1. I/The Student will not operate an automobile while impaired, whether due to alcohol, drugs (prescription or nonprescription), lack of sleep, or distraction of any kind. I/the Student will at all times comply with California law regarding proper operation of the Vehicle, including compliance with all speed limits and posted signs and placards.
2. I/The Student will not operate an automobile that I/The Student believe, for any reason, is mechanically unsafe or that may become unsafe due to weather or other natural conditions. The automobile will have working seatbelts, which I/the Student will use at all times. The Vehicle(s) may be inspected by District representatives.
3. I/The Student will be the sole driver of the Vehicle. I will not let anyone else, ride in or occupy the Vehicle while traveling to or from any District-sponsored activity, or while I/the Student attend a District-sponsored activity.

By signing below, you are authorizing the District, at its discretion, to (a) obtain a copy of the Student’s Driver Record History and confirm the status of the Student’s Driver’s License, (b) conduct a criminal background check, and/or (c) contact the listed insurance company to confirm the existence of insurance coverage for the Student and the vehicle.

Printed Student Name	Signature	Date
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Printed Parent/Guardian Name	Signature	Date
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Date Received by District:	Received by:
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