# JACKSON COUNTY SCHOOL DISTRICT #9 ATHLETIC/ACTIVITY PARTICIPATION CONTRACT

Required in all grades - to be completed once every school year

| STUDENT NAME  |  |                      |
|---|--|----------------------|
| LAST  | FIRST  | MIDDLE               |
| SCHOOL ATTENDED LAST YEAR   | GRADE THIS YEAR                                      |                      |
|   |  |                      |
| • INDICATE (Check) WHICH SPORTS AND/OR ACTVITIES STUDENT F  | PLANS TO PARTICIPATE (school year 15-16)             |                      |
| <u>SPORTS - \$20.00 participation fee</u>   |  |                      |
| FALL:FOOTBALLVOLLEYBALLCROSS COU  | INTRY  |                      |
| WINTER:BOYS BASKETBALLGIRLS BASKETBALLWRESTLING   | 3  |                      |
| SPRING:TRACK & FIELD  |  |                      |
| PARENT/GUARDIAN:  |  |                      |
| LAST NAME   | FIRST NAME RELATION                                  | ISHIP TO STUDENT     |
| MAILING ADDRESS:  |  |                      |
| ADDRESS WHERE STUDENT RESIDES:  |  |                      |
| PARENT/GUARDIAN EMERGENCY CONTACT PHONE #:  |  |                      |
| PHYSICIAN:  | PHONE:   |                      |
|   |  |                      |
| INSURANCE INFORMATION – MANDATORY – All athletes must have one  | or the other   |                      |
| My child is covered by insurance carried by parent/guardian. Ple  | ease submit a copy of your current insurance card to | the athletic office. |
| 0   | R  |                      |
| My child is covered by school purchased insurance.<br>PLEASE NOTE: School Time and 24 HR Insurance cove | ers all sports EXCEPT football.                      |                      |
| Date Purchased:   | AND provide verification of insurance to the ath     | letic office.        |
| School Time Insurance 24 HR Insurance   | Football Insurance                                   |                      |
|   |  |                      |
|   |  |                      |

#### THE FOLLOWING REQUIREMENTS MUST BE MET BEFORE PARTICIPATION BEGINS

- ATHLETIC/ACTIVITY PARTICIPATION CONTRACT COMPLETED, SIGNED, AND RETURNED TO ATHLETIC OFFICE (must be turned in prior to participating in tryouts)
- INSURANCE COVERAGE (copy must be on file or insurance purchased)
- CURRENT PHYSICAL (copy must be on file with the school)
- PARTICIPATION FEE \$20 Athletics -- PAID BY FIRST CONTEST

## JACKSON COUNTY SCHOOL DISTRICT #9 ATHLETIC/ACTIVITY PARTICIPATION CONTRACT

Your student has expressed a desire to become a student member of a School District #9 Athletic or Activity Team. It is a requirement of participation that the student and the parent/guardian read and sign this contract and return it to the athletic office PRIOR to tryouts/participation.

- Middle School students must submit in full, the Athletic fee of \$20 in order to participate.
- Student must pass a physical examination prior to the first tryout/practice. The physical is valid for 2 calendar years. The required form is available in the athletic office.
- Student will be responsible for all school owned equipment issued to them. Student will be held monetarily accountable for school issued equipment that is lost or damaged outside of the scope of participation. Future participation may be withheld if equipment is not returned and/or restitution is not made.
- Student will conform to the rules of scholastic eligibility as defined by School District #9 and its coaching staff. COACHES MAY SUPPLEMENT THE CODE OF CONDUCT WITH ADDITIONAL PARTICIPATION AND TRAINING OBLIGATIONS that is aligned with the High School Head Coach's Philosophy.
- I understand and fully assume all risks to my child and his/her property arising out of or associated with participation (including, but not limited to, damage and loss of property, bodily injuries, medical treatment, and death).
  Furthermore, I fully and forever release School District #9 (including, but not limited to, its officer, trustees, representative, employees, and agents) from any and all demands, claims, actions, suits, damages, losses, liabilities, costs, and expenses arising out of, directly or indirectly, or connected with my child's participation in School District #9 sports/activities from any cause whatsoever, whether or not foreseeable.
- It is the responsibility of the parent/guardian to ensure that their child has adequate insurance coverage each school year for all athletic activities in which they participate. School District #9 does not maintain insurance to cover injuries to individuals incurred as a result of participation.
  - My signature below acknowledges responsibility for maintaining appropriate insurance and providing School District #9 with current, accurate information in regard to personal insurance coverage. I understand that School District #9 will not pay any insurance claims for my child connected with his/her participation in sports/activities within School District #9.
  - I recognize that medical treatment may be necessary on an emergency basis and school personnel may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, for my child as may be deemed necessary under the circumstance existing at the time of the emergency.
- I wish my child to have the privilege of participating in competitive school athletics/activities and therefore he/she has my permission to participate in contests approved by School District #9 and may go with the team on scheduled trips. My signature gives permission for the release of information needed for colleges and universities.

I have read the Code of Conduct/Academic Requirements and understand what is required and agree to abide by the terms of participation. I agree to the terms of this contract and attest that the information given on page one is accurate.

#### SIGNATURE OF STUDENT PARTICIPANT

DATE

As a parent of a student athlete of School District #9:

- I will remember that middle school athletics are an extension of the classroom and learning is taking place.
- I will not direct negative comments or profanity toward officials, players, or coaches.
- I will respect the abilities and efforts of our opponents, the officials and coaches, regardless of the outcome of the contest.
- I will appreciate and applaud all good plays and players whether they compete for my team or against it.
- I will acknowledge that I am not the coach of the team or an official and will leave those duties to the persons hired for those responsibilities.
- I will support the team with positive actions and encouragement.
- I will accept both victory and defeat with pride and compassion.
- I will remember that my actions reflect not only on me and my student athlete, but also on the school and the community.
- I will be a fan.....not a fanatic!

In the event that my student-athlete or I have a genuine concern regarding participation in a sport, I will follow the correct protocol:

- 1. I will contact the Head Coach by phone or email to request a meeting.
- 2. If, after meeting the Head Coach, a satisfactory conclusion has not been met, I will contact the Athletic Director by phone or email to request a meeting.
- 3. I will not approach any coaching staff or district employee before, during, or immediately after an athletic event or practice session to discuss concerns.

I have read the above information and understand and agree to abide by these expectations for myself and my student-athlete.

Printed name of Parent/Guardian

Printed name of Student-Athlete

### STUDENT ATHLETE SPORTSMANSHIP CODE

As a student athlete of School District #9:

- I will know and understand the rules of my sport.
- I will be courteous to opponents, fans, coaches, administrators, and cheerleaders.
- I will respect and abide by the official's decisions.
- I will support and encourage my team to win with grace and lose with dignity.
- I will display appreciation for a good performance regardless of who makes it.
- I will cheer for our High School team and refrain from making negative or derogatory comments about the opponent or officials.
- I will remember that High School athletics are an extension of the classroom and that learning is taking place during the contest.
- I will support the rules and policies of the school and coaching staff.
- I will remember that good citizenship is not reserved for only athletic events and will practice good citizenship at every opportunity.
- I will make every effort to represent the school and community in a positive way, and encourage others to do the same.
- I will be a leader in the school and on my team by representing both with a positive attitude, good work ethic, and highest standard of character.
- I will remember that my actions reflect on my family, my peers, fellow team members, our coaching staff, our school, and our community; just as their actions reflect upon me and my sport.

I have read the above information and understand and agree to abide by these expectations.

Printed name of Student-Athlete