

OCTORARA ATHLETICS

STUDENT-ATHLETE and PARENT HANDBOOK



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Business Manager
High School Principal
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Director of Athletics
Athletics Secretary
Athletic Trainer /Strength Coach
Athletic Trainer

PIAA SPORT OFFERINGS

BOYS

Baseball
Basketball
Cheerleading
Cross Country
Football
Golf
Soccer
Tennis
Track & Field
Wrestling

GIRLS

Basketball
Cheerleading
Cross Country
Field Hockey
Golf
Soccer
Softball
Tennis
Track & Field
Volleyball

INTRODUCTION

Welcome to the Octorara Area School District Athletic Department. Every school year, more than 800 student-athletes participate in Octorara interscholastic athletics in grades 7-12. The administration and coaching staff are proud of the life experiences and life lessons that can be taught to our student-athletes through participating on our teams.

The goal of the Handbook for Student-Athletes and Parents of Student-Athletes is to effectively communicate the role of the administration, coaches, players, parents and booster clubs in administering a successful interscholastic athletic program for students in grades 7-12. Additionally, the handbook will present PIAA and Octorara athletic policies (*See Appendix D*), procedures and guidelines so that the program can be successfully administered. We thank you for using the information in the Handbook and being a student-athlete and parent who helps make the program stronger, better and more productive for all of our students.

A NOTE TO PARENTS

Being a parent of a student-athlete can be rewarding and also challenging. The rewards and responsibilities of parenting are often complicated by being a parent of a student- athlete. We hope this handbook assists your understanding of the Octorara School District mission, philosophy, program objectives, policies (*See Appendix D*), procedures and guidelines. Please take time to review this information with your son or daughter. If you have questions regarding the information in this handbook, please contact the Athletic Office at 610-593-8254 ext 6128.

PHILOSOPHY

The Octorara Area School District offers numerous activities which are an extension of the classroom. The goal and purpose of interscholastic athletics is to TEACH students the meaning and understanding of sportsmanship, commitment, fairness, sacrifice, teamwork and hard work. Additional goals include knowing how to win and lose with class and grace, increasing the knowledge of the activity, realizing potential, developing a healthy lifestyle and skill development. The activities are laboratories for learning. The Octorara Area School District school board, administrators, teachers and coaches are committed to excellence and providing the best opportunities for students. The participants must keep in mind that they are often in the public eye and that their personal conduct on and off the field must always be above reproach. Student athletes have an obligation to create a favorable image and to gain the respect of their peers and adult citizens of the community.

RELATIONSHIPS

The Parent-Player Relationship

The attitude of the parent can be the most influential factor in determining if a student- athlete has a rewarding interscholastic athletic experience or a disappointing interscholastic athletic experience. The attitude of the parent is more influential than the talent level of the student- athlete, the amount of playing time, the attitude of the coach, the attitude of the players or the win-loss record. Many student-athletes describe the "worst 15 minutes of the day" as the ride home in the car after a practice or competition due to the parent's negative attitude towards the student-athlete, the coach or the teammates.

What a student- athlete needs the most is unconditional love and support from the parents no matter what happens during practices and games.

The Player-Coach Relationship

Throughout the growth of youth sports during the past 25 years, many adults believe they understand or perhaps know more than their coaches. Many parents believe they have a degree of expertise from playing or coaching experiences. While this knowledge may heighten your appreciation of the sport, as a parent, you are not the coach. The player-coach relationship is the most critical relationship in athletics. A parent can have a pronounced effect on this very important and delicate relationship. While you may not agree with all the decisions of the coach, how and when you express your feelings can have a profound effect upon your child. If you express a negative opinion in front of your child, you need to remember that he or she will return to practice the next day and will likely carry with him or her your convictions. Your son or daughter will then have to interact with this coach. You as a parent can greatly affect this delicate relationship. Receiving technical or strategic instructions at home may interfere and conflict with the instructional process at practice sessions or during competitions. This may ultimately impede your son or daughter's progress and affect their playing time or whether they win a starting position on the team.

The Parent-Coach Relationship

In your role as a parent, you obviously love and are concerned about your child's welfare and success. You want the best for him or her. However, the athlete can have only one coach. Allowing the coach to instruct and guide the team is crucial for the success of the team. If you should have questions or concerns, do not approach the coach at the conclusion of a contest or during a practice. At this time coaches have other responsibilities and may be very emotional. You should call and make an appointment for a later time and approach the meeting in a calm, courteous and logical manner. One of the responsibilities of a coach is to meet with the team at the conclusion of a contest. Student-athletes should not pause to talk to parents immediately after the game. These brief meetings are essential to the learning process involved in interscholastic athletics.

The Parent-Official Relationship

The age-old question often used by irate fans to coaches and athletic directors is "Where did you find these officials?" Each sport in the Lancaster Lebanon League has an official's assignor who assigns the officials for every game for the entire season. Officials are evaluated by the coaches at the conclusion of each season. Officials agree to follow a code of ethics; they do not care or have an interest in which team wins the contest. The games will not be played without PIAA certified officials. As in any vocation, there are great, good and average officials. However, each official is doing their best to provide a safe, unbiased and structured environment for the student-athletes. As a parent, you should recognize that nothing positive will result in yelling and criticizing officials. In fact, many negative actions can occur by a parent yelling at the officials. For example, you will embarrass your child, you will look foolish, you will set a poor example that others may follow, you will escalate a negative environment and you may be removed from the competition. Always do your best to display good sportsmanship at all times.

The Spectator- Cheerleaders Relationship

Cheerleaders try to infuse spirit into the fans and spectators and to lead them in selected cheers. Please do not take this responsibility into your own hands; that is inappropriate. Fans that leave the stands to direct cheers may often cause or lead to confrontations with the opponents. Please follow the cheerleaders' directions and support their efforts. The emotion and atmosphere at athletic contests can be very exciting and the cheerleaders need to be allowed to direct and control this aspect of the contest.

Parent-Athletic Director Relationship

The Athletic Director supervises the administering of all high school and middle school athletic teams. Prior to approaching the Athletic Director regarding the management of an athletic team, a parent should first speak to the coach. If the parent is not satisfied with the discussion with the coach, a parent may request a meeting with the Athletic Director and the coach. However, the issue of playing time, coaching techniques and strategies are not appropriate topics of discussion with the coach or Athletic Director. If the parent is not satisfied with the coach-Athletic Director meeting, then the parent should contact the building principal.

THE ATHLETIC DEPARTMENT CHAIN OF COMMAND

When dealing with concerns the following chain of command should be used:

1. Student-Athlete
2. Coach
3. Athletic Director
4. Principal
5. Superintendent
6. School Board

Please follow the chain of command in all situations, do not go directly to the superintendent or school board as they will refer you back to the appropriate level.

PARENT/COACH COMMUNICATION PLAN

Both parenting and coaching can be very difficult vocations. By better understanding each other, we are better able to accept the actions of the other and provide greater benefit to our student-athletes. As parents, when your children become involved on the Octorara athletic teams, you have the right to understand the expectations which are placed upon you and your child. This begins with clear communication from the coach of your child's athletic team.

1. Philosophy of the coach and the Octorara Area School District athletic program.
2. Expectations the coach has for the student-athlete.
3. Locations and times of all practices and contests.
4. Team and school requirements-behavior and academics.
5. Procedure if a student-athlete is injured during participation and insurance information.
6. Actions that could lead to discipline, which may result in the denial of the student-athlete's participation.
7. The dissemination and collection of the Parent Code of Conduct. (See Appendix B)

HOW TO HANDLE AN ATHLETIC TEAM CONCERN

1. Encourage your child to speak directly to the coach. Many concerns can be resolved through this process. We hope to teach our student-athletes how to problem solve. This is a great opportunity to learn this valuable life lesson.
2. Contact the coach to schedule an appointment.
3. If the coach cannot be reached, contact the Athletic Director. We will assist you in scheduling a meeting.
4. Do not present your concerns to a coach before a contest, after a contest (This can be an emotional time for both the coach and the parent) or during a practice.
5. If the meeting with the coach does not provide a resolution, contact the Athletic Director to discuss the situation.

APPROPRIATE CONCERNS TO DISCUSS WITH THE COACH

1. How your child is being treated by the coach or others.
2. Ways that your son/daughter may improve.
3. Concerns about your child's behavior or academic performance.

It is difficult to accept your child not playing as much as you would hope. Coaches are professionals and they make judgments based on what they believe to be best for the team. As you can see from the above list, there are certain topics that should be discussed with the coach. Other topics, such as playing time, coaching strategies, and concerns about other student-athletes should be left to the discretion of the coach.

COMMUNICATIONS COACHES EXPECT FROM PARENTS

1. Express your concerns directly to the coach.
2. Notification of any scheduling conflicts well in advance.
3. Support of all the members of the team, including the coaches and administration.
4. Work to promote a positive environment that is conducive to the development of student-athletes.
5. Become knowledgeable with and review the philosophy, rules, regulations and guidelines pertaining to Octorara Athletics.
6. Communicate all concerns in a timely manner, following the proper protocol.
7. Treat all coaching personnel and administrators with courtesy and respect and encourage your child to do the same.

8. Understand that team goals are more important than individual goals.

Participation in athletics can offer our student-athletes the opportunity to experience some of the most rewarding times of their lives. It is important to understand that there also may be times when things do not go the way the parents and students expect. At those times discussion with the coach is encouraged. However, sometimes students will fail to achieve their goals. That is OK as we often learn more from our failures than we do our successes. Student-athletes should be taught to accept and overcome failure and not to embrace it.

REQUIREMENTS FOR OCTORARA STUDENTS TO PARTICIPATE ON OCTORARA ATHLETIC TEAMS.

1. The student must be enrolled in the Octorara School District and provide proof of residency. A valid driver's license for the parent/guardian showing residency must be provided at the time of registration if the enrollment is from a transfer from another school district to Octorara.
2. The student must be in grades 7- 12.
3. The student must meet age requirements. A student-athlete may not participate on a junior high athletic team when he or she is 16 years old before July 1. A student- athlete may not participate on a senior high athletic team if he or she is 19 years old before July 1.
4. The student must have a preparticipation athletic physical (dated June 1st or later) and a recertification form for all subsequent sports seasons in the same school year. The Octorara Area School District will offer free sports physicals after June 1st, prior to the start of next academic year. Physical forms are available in the high school and middle school offices and online at [Octorara Junior-Senior High School / Sports Documents](#).
5. The student athlete must meet academic eligibility requirements. *See Appendix A* – Student Athletics Code of Conduct for specific requirements.
6. The student-athlete must exhibit good behavior in the classroom and on the athletic team. A coach has the authority to deny a student-athlete from trying out or participating on an Octorara athletic team if the student-athlete has exhibited behavior that is detrimental to management and/or cohesion of the team. Participation in athletics is a privilege, not a guaranteed right.
7. A student and his/her parent/guardian must sign the Student-Athlete and Parent code of conduct forms before the end of the first week of the season.

GENERAL INFORMATION

COLLEGE SELECTION AND RECRUITING

See Appendix F – NCAA Eligibility Center – Playing Sports in College

Any student-athlete considering playing sports in college should contact his/her guidance counselor at the beginning of their freshman year to ensure the proper academic classes are scheduled.

WEBSITE

Athletic department information can be found on the Octorara Area School District website <https://www.octorara.k12.pa.us/Domain/4> Follow the link to athletic updates. Each sports team will also have a link to the website. Other important websites are <https://arbiterlive.com/> . These websites have the most recent athletic schedules for all sports in addition to directions to all away contests. You will also get instant notification of any schedule changes and/or cancellations by signing up with your e-mail address. This is a great communication tool for our parents and fans.

INJURIES TO ATHLETES

Injuries to student-athletes involved in interscholastic sports are inevitable. Sooner or later almost all athletes sustain some type of injury, hopefully it is minor and the athlete can return to his/her sport in a short amount of time. When an athlete sustains an injury in practice or during a game, the athlete should notify the Athletic Trainer and coach immediately. Octorara High School contracts with PennMedicine Lancaster General Health Sports Medicine to provide Athletic Training Services for our student athletes grades 7-12. Mr. Austin Sroda (asroda@octorara.org) is our Head Athletic Trainer, assisted by Mr. Mike Dueck (mdueck@octorara.org). They will arrive on campus between 12:00pm-2:00 pm every day depending on game schedules for the day. Additionally, Mr. Austin or Mr. Mike will stay on campus until all Jr/Sr High sporting events are over. They will be present for home games and practices. Mr. Austin also manages the preparticipation sports physical examinations and administers the ImPACT testing program.

SECONDARY ACCIDENT INSURANCE

The Octorara School District does not provide free insurance for Octorara student-athletes participating on the School Board approved interscholastic athletic teams. However, information can be provided on how to get insurance for your student athlete.

TRANSPORTATION OF STUDENT- ATHLETES

Transportation will be provided by the school district to all athletic events. Students are expected to utilize school provided transportation to and from all athletic events. Students may be excused from using the school transportation if a “Request for Alternate Transportation” form is completed, submitted and approved by the principal or athletic director prior to the event. This note must specify who will be driving and must be signed by a parent/guardian. *See Appendix H*

BOOSTER CLUBS

See Appendix I

The purpose of the Booster Clubs is to support the student-athletes, coaches and administration in enhancing the opportunities and experiences for the athletes. Booster clubs do not have input regarding coaching strategies or personnel decisions.

SPORTSMANSHIP

See Appendix J

Sportsmanship is expected from student-athletes, coaches, administrators, parents and fans at all times. We teach our student-athletes to win with class and lose with dignity. Please demonstrate good sportsmanship at all school sponsored events.

SPECIALIZATION IN SPORTS

See Appendix K

Specialization in one sport is not in the best interest of young athletes. In addition to having higher

injury rates than students who do more than 1 sport, there is a higher drop-out rate and the regret that they didn't do more activities with their friends and class members. College coaches most often look for well rounded athletes who can demonstrate time management skills and who have varied athletic abilities.

ImPACT TESTING

As part of the school board approved Traumatic Brain Injury (TBI) program, the Athletic Department will strive to baseline test athletes at the beginning of their sports season. The ImPACT test is a neuropsychological assessment through the use of a computer based program. The test provides an objective measurement of attention span, working memory, sustained attention, reaction time response variability, visual and verbal memory, selective and non- verbal problem solving. The test results for each baseline test is password protected and will be retained on a secure ImPACT server. Baseline tests will be given in grades 7, 9 and 11 as recommended by the ImPACT Company. Athletes in grades 8, 10, 12 who did not take a test the year prior will also be given the baseline test. If sports related TBI occurs during the season, the athlete will be retested with ImPACT. The retest results will be compared to the baseline test and can be used to assist the medical staff and doctors in making a return to play decision.

Two Sport Participation Policy and Procedure

The following guidelines must be followed in order to certify an athlete to participate in two sports during the same sport season:

1. The athlete must determine and announce their major sport and the athlete cannot change their choice of a major sport after the date of the first legal competition.
2. The head coaches of each sport must meet by the end of the first week of the season and prepare a schedule that allows attendance on both teams.
3. The 2 sport athlete cannot quit either of the 2 sports and must finish the season in good standing to be eligible for any awards. The athlete may quit both sports but not just one.
4. The coaches of each sport should have a meeting with the athlete and his/her parents before the first date of legal competition to review the schedule and commitments.

Admission Prices to Athletic Contests

High School Sporting Admission Price:

-Adults: \$5.00

-Students: \$3.00

APPENDIX

A



OCTORARA AREA SCHOOL DISTRICT
Home of the BRAVES

ATHLETIC

Code of Conduct

PHILOSOPHY

Interscholastic athletics is an integral part of the total educational program of the Octorara Area School District. The purpose of the athletic program is to promote the physical, mental, moral, social, and emotional well-being of each student-athlete, while teaching them sportsmanship, commitment, sacrifice, teamwork, and hard work. The Octorara Area School District's school board, administrators, teachers and coaches/advisors are committed to excellence and providing the best opportunities for students. Student-athletes must keep in mind that they are often in the public eye and that their personal conduct must always be above reproach. They have an obligation to create a favorable image and to gain the respect of their peers and adult citizens of the community.

DEFINITIONS

Athletics – the program of interscholastic athletics shall include all activities relating to competitive or exhibition sport contests, games or events involving individual students or teams of students when such events occur between schools within this district or outside the district.

EXPECTATIONS

In addition to the expectations outlined in the Octorara Area School District Student Handbook, the following expectations are in place for all student-athletes.

1. Student-athletes are the responsibility of their coaches until the organization returns to the junior/senior high school. When returning from an event student-athletes are expected to leave the premises immediately. No student may be released by a coach prior to returning to the school unless prior approval was granted by the Athletic Director or Principal. Participants are strongly encouraged to travel with their team at all times. We are striving to promote unity and loyalty
2. Student-athletes are expected to attend and participate in all practices, games, and team events. The only excusable absence from practice, games or team

events is an emergency situation or one previously approved by their coach. Below are some examples of emergency situations:

- a. A death in the family
- b. Automobile accidents
- c. Illness and not in school

Below are some examples of absences that would receive approval from the coach assuming prior notification was given:

- a. College visit
- b. Medical appointments
- c. Religious observances
- d. Any other situation that the coach considers acceptable

An unexcused absence is an absence in which the coach did not have prior knowledge. An emergency situation would be an exception to this rule.

3. Equipment issued for practice and competition should be cared for properly. Loss or failure to turn in equipment at the end of the season will result in payment to replace it.
4. Berating or criticizing officials/judges will not be tolerated. Doing so is immediately considered a Level II or III violation and will result in the consequences outlined below.
5. Being ejected from a competition is immediately considered a Level II or III violation. Consequences outlined below along with PIAA consequences will be implemented.
6. Students are expected to:
 - a. Uphold and exemplify our mission:



- b. Understand that their actions are representative not only of themselves, but also the entire athletic program.
- c. Represent the School District, community, and themselves in a positive manner.
- d. Show respect for all in authority as well as for all facilities, property, and equipment.

7. Students are expected to follow all school rules while riding to and from events. Standing or moving about the bus/van is considered unacceptable behavior and will result in the consequences outlined below.
8. Any student who is in ISS or OSS may not attend athletic events that day.
9. Student-athletes must abide by the OASD Athletic Health and Safety Plan failure to do so is considered a Level II violation.

The following consequences will be implemented if a student-athlete's misconduct occurs while participating in an interscholastic athletic event, including, but not limited to, a practice, game, competition, team dinner, team meeting, and traveling with a team. Violation of the code of conduct may result in additional school discipline.

Level I – Student Misconduct Violation

Disciplinary Response: Suspension from 1 competition/contest.

- Unacceptable behavior
- Outspoken disrespect
- Obscene gestures/profanity-minor
- Lying/forgery
- Horseplay

- Late to practice without notifying the coach, unless deemed an emergency situation.
- Use/possession of personal electronics including beepers, pagers, cell phones, and other devices during practice or games without permission. (Forfeiture until returned to parents.) Refusal to relinquish the device will result in a Level II violation.
- Inappropriate display of affection
- Any other behavior deemed inappropriate by administration

Level II – Student Misconduct Violation

Disciplinary Response: Suspension from 2 competitions/contests.

- Continuation of Level I violations
- Obscene gestures/profanity-major
- Harassment/threatening of a student

- Fighting (verbal)
- Physical altercation
- Instigating conflicts with/between other students
- Violation of social restriction
- Insubordination
- Disrespect toward coach, administrator, event staff, game official ●
- Misuse/abuse of school property (restitution made if applicable)
 - Possession or use of tobacco products (see smoking code)
 - Leaving practice/competition without permission
 - Unexcused absence from practice/competition
 - Ejection from competition (PIAA guidelines will be followed)
 - Gambling (any game or action that results in an exchange of money, goods, favors, etc.)
- Any other behavior deemed inappropriate by administration

Level III – Student Misconduct Violation

Disciplinary Response: Expulsion from the athletic team.

- Continuation of lower level violations
- Obscene gestures/profanity directed toward a staff member
- Threatening a coach or staff member
- Assault
- Violation of the school district's drug and alcohol policy (see drug & alcohol policy)
- Arson or false alarms
- Theft
- Bomb threats
- Falsifying documents/tampering with records
- Making terroristic threats
- Vandalism
- Ethnic, religious, sexual slurs; written, verbal, or drawn (meant to be demeaning to others)
- In appropriate comments referring to a person's physical or mental disabilities ●
- Any act punishable under the PA Crime Code or any other legislative enactment, state or federal.
- Any other behavior deemed inappropriate by administration

Level III violations are of a nature that their commission represents a violation of the law and are subject to civil and/or criminal penalties. A local law enforcement agency shall be notified about offenses in this category. The administration may consider an

offense in the Level III category serious enough to be a threat to the health, safety or welfare of others. In such cases, a recommendation will be made to the school board for expulsion from school for the first offense. If need be, restitution for damages will be required.

ELIGIBILITY

Student-athletes are expected to be present and on time for all practices and games. If you will be late or miss a practice or game, you must notify the coach and receive permission in advance. Failure to do this will be considered an unexcused absence. An excused absence may be granted due to illness, death in the family or an emergency situation. A student who will miss a practice or game because of a school sponsored activity must submit a written request to the coach at least three days prior to missing in order to be eligible for the event in question.

If a student leaves school due to illness, he/she may not return that day to practice or play in a game.

A student must be in school by 9:00 a.m. in order to practice or play in a game unless he/she has written approval from the principal or athletic director or a doctor's note..

When attending an evening athletic event, student-athletes will not arrive more than 15 minutes prior to or depart more than 15 minutes after the event has ended. Athletes remaining at school for late practices or evening contests are to report to their coach and remain under his/her supervision until the practice or contest begins.

Athletes may not participate in more than one sport per season without the consent of both coaches and athletic director.

The School Board recognizes the value of athletic participation for our students and believes it to be an integral component of the program offerings that we provide. The Board also realizes that participation in athletics is a privilege. Students must maintain satisfactory performance in the classroom to participate on an athletic team. Academic performance is monitored on a weekly basis (Monday through Sunday) through the office of the athletic director. An academic eligibility report is distributed to the coaching staff every Saturday during the season. Each coach is responsible for notifying the ineligible athlete and applying intervention measures. While a student-athlete is

ineligible, he/she may not participate in competitions. Once an athlete has been identified as being academically ineligible, his/her status will not change during that week. . According to P.I.A.A. rules and school policy:

- Any student-athlete with two (2) or more failing grades on the weekly report the **first** time during a season are ineligible to participate in athletic contests.
- Student-athletes who are determined to be ineligible on the weekly report a **second** time during a season may not practice or compete in contests.
- Student-athletes who are determined to be ineligible on the weekly report a **third** time during a season will be dismissed from the team for the remainder of that sports season.
- Student-athletes who have two (2) or more failures on their **report card** will not be permitted to practice or compete for the first 15 school days of the next marking period.

At the end of the school year, any student-athlete who is **not promoted to the next grade level** will not be able to compete in a fall sport, but may apply to the athletic director for permission to compete in the winter and spring seasons upon a review of academic progress. The exception to both the promotion rule and the 4th marking period rule will be students who successfully complete summer school courses to improve their academic standing and achieve promotion. See the chart below for further details on timelines.

STUDENTS WITH TWO (2) OR MORE FAILURES

Marking Period	Result
1 st	Suspended from competition for first 15 school days of second marking period starting the day report cards are mailed.
2 nd	Suspended from competition for first 15 school days of third marking period starting the day report cards are mailed.

3 rd	Suspended from competition for first 15 school days of fourth marking period starting the day report cards are mailed.
4 th	Suspended from competition for first 15 school days of first marking period starting the first full day of school. Students may not compete in any game or scrimmage before the first day of school but may practice.

Appendix B



OCTORARA AREA SCHOOL DISTRICT PARENT/GUARDIAN CODE OF ETHICAL CONDUCT & EXPECTATIONS

Home of the BRAVES

Interscholastic athletics is an integral part of the total educational program of the Octorara Area School District. The purpose of the athletic program is to promote the physical, mental, moral, social, and emotional well-being of each student-athlete, while teaching them sportsmanship, commitment, sacrifice, teamwork, and hard work. The purpose of this code of conduct is to develop parental support and positive role models for our student-athletes. Listed below are the guidelines and expectations that the Octorara Area School District expects all parents/guardians to follow for all athletic events, home and away.

A. EXPECTATIONS FOR PARENTS/GUARDIANS

As an Octorara Area School District parent/guardian, I agree to:

- be a positive role model for my child, the school and community;
- display a positive attitude and behavior;
- show respect for all participants, officials, coaches, athletic personnel, and school facilities;
- teach my child that hard work and honest effort are more important than winning; • put the best interests of the team above my child's personal glory;
- avoid putting pressure on my child to start, score, or be the star of the team; • encourage my child to attend school regularly and excel academically; • inform my child of the dangers of using and discourage the use of any controlled substances or tobacco;
- follow the chain of command when I have a concern; and
- express my concerns and questions in a courteous and civil manner. •

Abide by the OASD Athletic Health and Safety plan.

B. CONSEQUENCES FOR SPECTATOR EJECTION FROM AN EVENT OR VIOLATION OF CODE OF CONDUCT

1. FIRST OFFENSE:

Any spectator who commits a first offense by violating the ethical code of conduct and/or being ejected from any sporting event hosted or sponsored by the Octorara Area School District must satisfy all of the following requirements before that spectator is permitted to attend any further athletic events hosted or sponsored by the Octorara Area School District:

- a. Complete the online "Positive Sport Parenting" course at NFHSlern.com (or another course deemed acceptable by the Athletic Director).

b. Attend an in-person meeting with the appropriate school Principal and Athletic Director at which the spectator will be required to present the Certificate of Completion awarded after completion of the "Positive Sport Parenting" course.

2. SECOND OFFENSE: Any spectator who commits a second offense by violating the ethical code of conduct and/or being ejected from any sporting event hosted or sponsored by the Octorara Area School District must complete all of the following requirements before that spectator is permitted to attend any further athletic events hosted or sponsored by the Octorara Area School District:

a. A second completion of the "Positive Sport Parenting" course at NFHSlearn.com (or another course deemed acceptable by the Athletic Director).

b. Attend a second in-person meeting with the Superintendent, appropriate school Principal and Athletic Director at which the spectator will be required to present the Certificate of Completion awarded after second completion of the "Positive Sport Parenting" course.

c. Serve a suspension from any and all athletic events hosted or sponsored by the Octorara Area School District for 30 days from the date of the second offense.

3. THIRD OFFENSE: Any spectator who commits a third offense by violating the ethical code of conduct and/or being ejected from any sporting event hosted or sponsored by the Octorara Area School District will not be permitted to attend any and all further athletic events hosted or sponsored by the Octorara Area School District for a period of one year from the date of the offense.

4. FOURTH OFFENSE: Any spectator who commits a fourth offense by violating the ethical code of conduct and/or ejected from any sporting event hosted or sponsored by the Octorara Area School District will be permanently barred from any and all athletic events hosted or sponsored by the Octorara Area School District.

WE/I AS (A) PARENT(S) HAVE READ THE ATHLETIC DEPARTMENT PARENT/GUARDIAN CODE OF ETHICAL CONDUCT & EXPECTATIONS DOCUMENT. WE/I UNDERSTAND THAT A FAILURE TO ABIDE BY THIS DOCUMENT MAY RESULT IN MY NOT BEING ABLE TO ATTEND FUTURE ATHLETIC CONTESTS

Student's Name : _____

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Appendix C

OCTORARA AREA SCHOOL DISTRICT COACHES CODE OF CONDUCT "Home of the BRAVES"



The Octorara Area School District believes that interscholastic athletics are an integral part of the total education program. Our coaches play a very important role in teaching student-athletes the meaning and understanding of sportsmanship, leadership, commitment, fairness, sacrifice, teamwork, and hard work. Coaches must balance the pressures of winning with teaching the skills of the sport, mentoring student-athletes, and building team unity. Coaches must also show student-athletes how to win and lose with class. A successful coach is not always the one who wins every game. A successful coach must have a broad spectrum of behavioral competencies that include ethical values, pride of accomplishment, acceptable social behaviors and compassion.

The coach should:

1. Uphold our district mission at all times

Bold Responsible Ambitious Virtuous Energetic Selfless
Confident in oneself *Accountable for choices, actions, and attitude* *Motivated to set goals and achieve them* *Humble in words and actions* *Committed to school and community* *Concerned about the rights and feelings of others*

2. Have a fair, unprejudiced, respectful relationship with the student- athletes.
3. Teach student-athletes to win through legitimate means only, striving to win at any cost is distinctly unethical.
4. Give opponents full credit when they win.
5. Control one's temper at all times.
6. Not use, and discourage the use of profanity and obscene language.
7. Recommend the use *of* competent Contest officials and support their decisions. The coach should not criticize the actions or decisions of Contest officials in public.
7. Not recruit students from other school districts.
8. Maintain control of the Team for which the Coach is responsible.
9. Educate the team members and parents about the Student Code of Conduct and enforce the requirements of the Student Code of Conduct.
10. Obtain Coaching Principle and Sports First Aid certifications during the first 2 years of employment.
11. Follow the medical directives of the Athletic Trainer to ensure a safe, physical environment.
12. Work with other coaches in OASD to ensure a positive experience for all student-athletes.
13. Avoid contracting athletes directly. Please set up a team app for mass communication.

- 14. Set goals and visions for the team.
 - 15. Develop practice plans, strategies, teaching sessions and contest plans.
 - 16. Project a positive image as a role model at all times, including the offseason activities.
 - 17. Allow athletes time to develop skills and interests in other athletic and non-athletic activities provided by the school and community groups.
 - 18. Supervise the student-athletes at all times to the best of their ability, including transportation and the locker rooms.
 - 19. Be willing to listen to student-athlete and parental concerns while trying to resolve issues in a professional and timely manner.
 - 20. Dress in a manner that will reflect positively on the school, community, team and student-athletes.
 - 21. Be aware of league and District III guidelines pertaining to their sport.
 - 22. Be professional and courteous to the media.
 - 23. Attend mandatory preseason meetings for all coaches.
 - 24. Abide by the OASD Athletic Health and Safety Plan.
-

I have read, understand, and agree to follow the OASD Coaches Code of Conduct.

COACH'S SIGNATURE: _____

COACH'S PRINTED NAME: _____

DATE: _____

Appendix D

BookPolicy Manual Section100 Programs TitleInterscholastic Athletics Code123
StatusActive AdoptedDecember 14, 2020

Purpose

The Board recognizes the value of a program of interscholastic athletics as an integral part of the total school experience for all district students and as a conduit for community involvement.

The program fosters the growth of pride within the student body as a whole and stimulates interest within the broader community.

The game activities and practice sessions provide opportunities to teach the values of competition, sportsmanship, and teamwork.

Definition

For purposes of this policy, the program of **interscholastic athletics** shall include all activities relating to competitive or exhibition sport contests, games or events involving individual students or teams of students when such events occur between schools within this district or outside this district.

Authority

It shall be the policy of the Board to offer opportunities for participation in interscholastic athletic programs to male and female students on as equal a basis as is practicable and without discrimination, in accordance with law and regulations.[\[1\]](#)[\[2\]](#)[\[3\]](#)[\[4\]](#)[\[5\]](#)

The Board shall approve a program of interscholastic athletics and require that all facilities utilized in that program, whether or not the property of this Board, properly safeguard both players and spectators and are kept free from hazardous conditions.[\[6\]](#)

The Board shall determine the standards of eligibility to be met by all students participating in an interscholastic program. Such standards shall require that each student, before participating in any interscholastic activity, be covered by student accident insurance; be free of injury; and undergo a physical examination by a licensed physician.[\[6\]](#)

The Board further adopts those eligibility standards set by the Constitution of the Pennsylvania Interscholastic Athletic Association and the district's policies and procedures.

The Board directs that no student may participate in interscholastic athletics who has not:[\[6\]](#)

1. Met the requirements for academic eligibility.
2. Complied with the requirements of the Athletic Handbook.
3. Complied with the requirements of the Code of Conduct for Interscholastic Athletics and Board policies and administrative regulations related to student discipline.
4. Attended school regularly.[\[7\]](#)
5. Been in attendance on the day of the athletic event or practice for the hours required.
6. Returned all district athletic equipment previously used.
7. Adhered to applicable discipline standards.[\[8\]](#)

Off-Campus Activities

This policy shall also apply to student conduct that occurs off district property and would otherwise violate the Code of Student Conduct if any of the following circumstances exist:[\[8\]](#)

1. The conduct occurs during the time the student is traveling to and from the district or traveling to and from district-sponsored activities, whether or not via district furnished transportation.
2. The student is a member of an extracurricular activity and has been notified that particular off-campus conduct could result in exclusion from such activities.
3. Student expression or conduct materially and substantially disrupts the operations of the district, or the administration reasonably anticipates that the expression or conduct is likely to materially and substantially disrupt the operations of the district.
4. The conduct has a direct nexus to attendance at school or a district-sponsored activity, for example, a transaction conducted outside of the district pursuant to an agreement made in the district, that would violate the Code of Student Conduct if conducted in the district.
5. The conduct involves the theft or vandalism of property.

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6. There is otherwise a nexus between the proximity or timing of the conduct in relation to the student's attendance at school or district-sponsored activities.

Delegation of Responsibility

Each school year, prior to participation in an interscholastic athletic activity, every student athlete and their parent/guardian shall sign and return the acknowledgement of receipt and review of the following: [\[9\]](#)[\[10\]](#)[\[11\]](#)[\[12\]](#)

1. Concussion and Traumatic Brain Injury Information Sheet.
2. Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet.

The Superintendent or designee shall annually prepare, approve and present to the Board for its consideration a program of interscholastic athletics, which shall include a complete schedule of events.

The Superintendent shall inform the Board of changes in that schedule as they occur.

The Superintendent or designee shall disseminate rules for the conduct of students participating in interscholastic athletics. Such rules shall be in conformity with regulations of the State Board of Education, the P.I.A.A., and the district.

The Superintendent shall ensure that similar athletic programs are offered to both sexes in proportion to the district's enrollment.

The Superintendent shall ensure that interscholastic athletics are open to all eligible students and that all students are fully informed of the opportunities available to them. [\[13\]](#)[\[14\]](#)

Guidelines

Male/Female Athletic Opportunities Report

By October 15 of each year, on the designated disclosure form, the Superintendent or designee shall report to the PA Department of Education the interscholastic athletic opportunities and treatment for male and female secondary school students for the preceding school year. [\[15\]](#)

By November 1 of each year, the completed disclosure form shall be made available for public inspection during regular business hours and posted on the district's website. [\[15\]](#)

The availability of the completed disclosure form shall be announced by posting a notice on district bulletin boards, in the district newspaper, on any electronic mailing list or list serve, and by any other reasonable means.[\[15\]](#)

Legal

1. 24 P.S. 1601-C et seq
2. 34 CFR 106.41
3. 22 PA Code 4.27
4. Pol. 103
5. Pol. 103.1
6. 24 P.S. 511
7. Pol. 204
8. Pol. 218
9. 24 P.S. 5323
10. 24 P.S. 1425
11. Pol. 123.1
12. Pol. 123.2
13. 22 PA Code 12.1
14. 22 PA Code 12.4
15. 24 P.S. 1603-C
- 24 P.S. 5321 et seq

BookPolicy Manual Section100 Programs TitleConcussion Management
Code123.1 StatusActive AdoptedDecember 14, 2020

Purpose

The Board recognizes the importance of ensuring the safety of students participating in the district's athletic programs. This policy has been developed to provide guidance for prevention, detection and treatment of concussions sustained by students while participating in an athletic activity.

Definitions

Appropriate medical professional shall mean all of the following:[1]

A licensed physician who is trained in the evaluation and management of concussions.

A licensed or certified health care professional or certified athletic trainer trained in the evaluation and management of concussions and designated by a licensed physician trained in the evaluation and management of concussions.

Athletic activity shall mean all of the following:[1]

Interscholastic athletics.[2]

An athletic contest or competition, other than interscholastic athletics, that is sponsored by or associated with the district, including cheerleading, club-sponsored sports activities and sports activities sponsored by district-affiliated organizations.[3]

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Noncompetitive cheerleading that is sponsored by or associated with the district.[3]

Practices, interschool practices and scrimmages for all athletic activities.[2][3]

Delegation of Responsibility

Each school year, prior to participation in an athletic activity, every student athlete and their parent/guardian shall sign and return the acknowledgement of receipt and review of the Concussion and Traumatic Brain Injury Information Sheet.[4]

The Superintendent or designee shall develop administrative regulations to implement this policy, which shall include protocols for concussion management.

Guidelines

The district may hold an informational meeting prior to the start of each athletic season for all competitors regarding concussions and other head injuries, the importance of proper concussion management, and how preseason baseline assessments can aid in the evaluation, management and recovery process. In addition to the student athletes, such meetings may include parents/guardians, coaches, other appropriate district officials,

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physicians, neuropsychologists, athletic trainers and physical therapists.[4]

Removal From Play

A student who, as determined by a game official, coach from the student's team, certified athletic trainer, licensed physician, or other official designated by the district, exhibits signs or symptoms of a concussion or traumatic brain injury while participating in an athletic activity shall be removed from participation at that time.[4]

Return to Play

The coach shall not return a student to participation until the student is evaluated and cleared for return to participation in writing by an appropriate medical professional. The Board may designate a specific appropriate medical professional(s) to provide written clearance and protocol steps for return to participation.[4]

Training

All coaches shall annually, prior to coaching an athletic activity, complete a concussion management certification training course offered by the Centers for Disease Control and Prevention, the National Federation of State High School Associations or another provider approved by the Department of Health.[4]

Penalties

A coach found in violation of the provisions of this policy related to removal from play and return to play shall be subject to the following penalties:[4]

For a first violation, suspension from coaching any athletic activity for the remainder of the season and for the next season.

For a second violation, permanent suspension from coaching any athletic activity.

Legal

1. 24 P.S. 5322

2. Pol. 123

3. Pol. 122

4. 24 P.S. 5323

24 P.S. 5321 et seq

BookPolicy Manual Section100 Programs TitleSudden Cardiac Arrest Code123.2

StatusActive AdoptedApril 20, 2020 Last RevisedDecember 14, 2020

Authority

The Board recognizes the importance of ensuring the safety of students participating in the district's athletic programs. This policy has been developed to provide guidance for prevention and recognition of sudden cardiac arrest in student athletes. [\[1\]](#)

Definition

Athletic activity shall mean all of the following: [\[1\]](#)

1. Interscholastic athletics. [\[2\]](#)
2. An athletic contest or competition, other than interscholastic athletics, that is sponsored by or associated with the district, including cheerleading, club-sponsored sports activities and sports activities sponsored by district-affiliated organizations. [\[3\]](#)
3. Noncompetitive cheerleading that is sponsored by or associated with the district. [\[3\]](#)
4. Practices, interschool practices and scrimmages for all athletic activities as defined above. [\[2\]](#)[\[3\]](#)

Delegation of Responsibility

Each school year, prior to participation in an athletic activity, every student athlete and their parent/guardian shall sign and return the acknowledgement of receipt and review of the Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet that includes information about electrocardiogram testing. [\[1\]](#)

Guidelines

The district may hold an informational meeting prior to the start of each athletic season for all competitors regarding the symptoms and warning signs of sudden cardiac arrest and information about electrocardiogram testing. In addition to the student athletes, such meetings may include parents/guardians, coaches, other appropriate district officials, physicians, pediatric cardiologists, and athletic trainers. [\[1\]](#)

Removal From Play

A student who, as determined by a game official, coach from the student's team, certified athletic trainer, licensed physician, or other official designated by the district, exhibits signs or symptoms of sudden cardiac arrest while participating in an athletic activity shall be removed by the coach from participation at that time. [\[1\]](#)

Any student known to have exhibited signs or symptoms of sudden cardiac arrest prior to or following an athletic activity shall be prevented from participating in athletic activities. [\[1\]](#)

Return to Play

The coach shall not return a student to participation until the student is evaluated and cleared for return to participation in writing by a licensed physician, certified registered nurse practitioner or cardiologist. [\[1\]](#)

Training

All coaches shall annually, prior to coaching an athletic activity, complete the sudden cardiac arrest training course offered by a provider approved by the PA Department of Health. [\[1\]](#)

Penalties

A coach found in violation of the provisions of this policy related to removal from play and return to play shall be subject to the following minimum penalties: [\[1\]](#)

1. For a **first** violation, suspension from coaching any athletic activity for the remainder of the season and for the next season.
2. For a **second** violation, permanent suspension from coaching any athletic activity.

Legal

1. 24 P.S. 1425
 2. Pol. 123
 3. Pol. 122
- Pol. 822

BookPolicy Manual Section100 Programs TitleExtracurricular Participation by Home Education Students Code137.1 StatusActive AdoptedDecember 14, 2020

Authority

The Board shall approve participation in the district's extracurricular activities and interscholastic athletic programs by a student enrolled in a home education program who meets all the conditions stated in Board policy.[\[1\]](#)[\[2\]](#)[\[3\]](#)[\[4\]](#)[\[5\]](#)

The Board shall not provide individual transportation for students enrolled in home education programs who participate in the district's extracurricular activities or interscholastic athletic programs. When the district provides transportation to and from an away competition, game, event or exhibition and requires district students to use district transportation, home education students shall be required to use the transportation provided by the district.

The Board may require the home education program to pay the cost of the expenses for a home education students' participation in the district's extracurricular activities or interscholastic athletic programs, when the same is expected of district students.

Guidelines

Students attending home education programs shall be given an equal opportunity to compete for positions and participate in district extracurricular activities and interscholastic athletic programs.

A home education student may participate in extracurricular activities and interscholastic athletic programs only at the school building the student would be assigned to if s/he was enrolled in the district.

Prior to trying-out or joining an activity, a home education student shall submit required documents and written verification of eligibility to the building principal or designee.

To be considered in attendance in accordance with Board policy, the home education student must participate in a full, normally scheduled academic program, in accordance with the planned home education program and submitted documentation.[\[5\]](#)[\[6\]](#)

The following conditions shall govern participation in the district's extracurricular activities

and interscholastic athletic programs by home education students, who shall:

1. Be a resident of the district.
2. Meet the required eligibility criteria.[3][4]
3. Maintain appropriate insurance coverage, consistent with the coverage requirements for district students.[4]
4. Comply with Board policies and school rules and regulations regarding extracurricular activities, interscholastic athletics, and student discipline.[3][4][7]
5. Comply with policies, rules and regulations, or their equivalent, of the activity's governing organization.[1][2]
6. Meet attendance and reporting requirements established for all participants of the activity or program.[6]
7. Meet the requirements for physical examinations and physical fitness and any height and/or weight restrictions.[2][4]
8. Comply with all requirements and directives of the district staff, coaches and administrators involved with the extracurricular activity or interscholastic athletic program.

Delegation of Responsibility

The building principal or designee shall ensure that home education students have access to information regarding the district's extracurricular activities and interscholastic athletic programs.

The building principal or designee shall receive and review verification from the parent/guardian that a student has met and continues to meet the established eligibility criteria for an extracurricular activity or interscholastic athletic program.

The building principal or designee shall distribute information regarding eligibility criteria and student participation in extracurricular activities and interscholastic athletics to all affected by them.

Legal

1. 24 P.S. 511
2. 24 P.S. 1327.1
3. Pol. 122

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4. Pol. 123

5. Pol. 137

6. Pol. 204

7. Pol. 218

Appendix E

Please refer to the following link:

<http://www.acostacarpenter.org/Title%20IX%20in%20a%20nutshell.pdf>

<https://nwlc.org/issue/athletics/>

<https://www2.ed.gov/about/offices/list/ocr/qa-complaints.html>

Appendix F

Please refer to the following link:

<https://web3.ncaa.org/ecwr3/>

Appendix G



**PIAA COMPREHENSIVE INITIAL
PRE-PARTICIPATION PHYSICAL
EVALUATION**



INITIAL EVALUATION: Prior to any student participating in Practices, Inter-School Practices, Scrimmages, and/or Contests, at any PIAA member school in any school year, the student is required to (1) complete a Comprehensive Initial Pre Participation Physical Evaluation (CIPPE); and (2) have the appropriate person(s) complete the first six Sections of the CIPPE Form. Upon completion of Sections 1 and 2 by the parent/guardian; Sections 3, 4, and 5 by the student and parent/guardian; and Section 6 by an Authorized Medical Examiner (AME), those Sections must be turned in to the Principal, or the Principal’s designee, of the student’s school for retention by the school. The CIPPE may not be authorized earlier than June 1st and shall be effective, regardless of when performed during a school year, until the latter of the next May 31st or the conclusion of the spring sports season.

SUBSEQUENT SPORT(S) IN THE SAME SCHOOL YEAR: Following completion of a CIPPE, the same student seeking to participate in Practices, Inter-School Practices, Scrimmages, and/or Contests in subsequent sport(s) in the same school year, must complete Section 7 of this form and must turn in that Section to the Principal, or Principal’s designee, of his or her school. The Principal, or the Principal’s designee, will then determine whether Section 8 need be completed.

SECTION 1: PERSONAL AND EMERGENCY INFORMATION

PERSONAL INFORMATION

Student’s Name Male/Female (circle one) Date of Student’s Birth: ____/____/____ Age of Student on Last Birthday: ____ Grade for Current School Year: ____ Current Physical Address
Current Home Phone # () Parent/Guardian Current Cellular Phone # () Fall Sport(s):
_____ Winter Sport(s): _____ Spring Sport(s):

EMERGENCY INFORMATION

Parent’s/Guardian’s Name_Relationship Address Emergency Contact Telephone #
() Secondary Emergency Contact Person’s Name Relationship Address
Emergency Contact Telephone # ()
Medical Insurance Carrier Policy Number Address Telephone # () Family Physician’s Name , MD or DO (circle one) Address Telephone # () Student’s Allergies
Student’s Health Condition(s) of Which an Emergency Physician or Other Medical

Personnel Should be Aware Student's Prescription Medications and conditions of which

they are being prescribed

Revised: March 22, 2017

<p>SECTION 2: CERTIFICATION OF PARENT/GUARDIAN</p>

The student's parent/guardian must complete all parts of this form.

A. I hereby give my consent for _____ born on _____ who turned _____ on his/her last birthday, a student of _____ School and a resident of the _____ public school district, to participate in Practices, Inter-School Practices, Scrimmages, and/or Contests during the 20____ - 20____ school year in the sport(s) as indicated by my signature(s) following the name of the said sport(s) approved below.

Fall Sports	Signature of Parent or Guardian
Cross Country	
Field Hockey	
Football	
Golf	
Soccer	
Girls' Tennis	
Girls' Volleyball	
Water Polo	

Other	
-------	--

Winter Sports	Signature of Parent or Guardian
Basketball	
Bowling	
Competitive Spirit Squad	
Girls' Gymnastics	
Rifle	
Swimming and Diving	
Track &	

Field (Indoor)	
Wrestling	
Other	

Spring Sports	Signature of Parent or Guardian
Baseball	
Boys' Lacrosse	
Girls' Lacrosse	
Softball	
Boys' Tennis	

Track & Field (Outdoor)		Boys' Volleyball		Other	
----------------------------	--	---------------------	--	-------	--

B. Understanding of eligibility rules: I hereby acknowledge that I am familiar with the requirements of PIAA concerning the eligibility of students at PIAA member schools to participate in Inter-School Practices, Scrimmages, and/or Contests involving PIAA member schools. Such requirements, which are posted on the PIAA Web site at www.piaa.org, include, but are not necessarily limited to age, amateur status, school attendance, health, transfer from one school to another, season and out-of-season rules and regulations, semesters of attendance, seasons of sports participation, and academic performance.

Parent's/Guardian's Signature _____ Date ___/___/___

C. Disclosure of records needed to determine eligibility: To enable PIAA to determine whether the herein named student is eligible to participate in interscholastic athletics involving PIAA member schools, I hereby consent to the release to PIAA of any and all portions of school record files, beginning with the seventh grade, of the herein named student specifically including, without limiting the generality of the foregoing, birth and age records, name and residence address of parent(s) or guardian(s), residence address of the student, health records, academic work completed, grades received, and attendance data.

Parent's/Guardian's Signature _____ Date ___/___/___

D. Permission to use name, likeness, and athletic information: I consent to PIAA's use of the herein named student's name, likeness, and athletically related information in video broadcasts and re-broadcasts, webcasts and reports of Inter-School Practices, Scrimmages, and/or Contests, promotional literature of the Association, and other materials and releases related to interscholastic athletics.

Parent's/Guardian's Signature _____ Date ___/___/___

E. Permission to administer emergency medical care: I consent for an emergency medical care provider to administer any emergency medical care deemed advisable to the welfare of the herein named student while the student is practicing for or participating in Inter-School Practices, Scrimmages, and/or Contests. Further, this authorization permits, if reasonable efforts to contact me have been unsuccessful, physicians to hospitalize, secure appropriate consultation, to order injections, anesthesia (local, general, or both) or surgery for the herein named student. I hereby agree to pay for physicians' and/or surgeons' fees, hospital charges, and related expenses for such emergency medical care. I further give permission to the school's athletic administration, coaches and medical staff to consult with the Authorized Medical Professional who executes Section 6 regarding a medical condition or injury to the herein named student.

Parent's/Guardian's Signature _____ Date ___/___/___

F. CONFIDENTIALITY: The information on this CIPPE shall be treated as confidential by school personnel. It may be used by the school's athletic administration, coaches and medical staff to determine athletic eligibility, to identify medical conditions and injuries, and to promote safety and injury prevention. In the event of an emergency, the information contained in this CIPPE may be shared with emergency medical personnel. Information about an injury or medical condition will not be shared with the public or media without written consent of the parent(s) or guardian(s).

Parent's/Guardian's Signature _____ Date ___/___/___

SECTION 3: UNDERSTANDING OF RISK OF CONCUSSION AND TRAUMATIC BRAIN INJURY

What is a concussion?

A concussion is a brain injury that:

- Is caused by a bump, blow, or jolt to the head or body.
- Can change the way a student's brain normally works.
- Can occur during Practices and/or Contests in any sport.
- Can happen even if a student has not lost consciousness.
- Can be serious even if a student has just been "dinged" or "had their bell rung."

All concussions are serious. A concussion can affect a student's ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most students with a concussion get better, but it is important to give the concussed student's brain time to heal.

What are the symptoms of a concussion?

Concussions cannot be seen; however, in a potentially concussed student, **one or more** of the symptoms listed below may become apparent and/or that the student "doesn't feel right" soon after, a few days after, or even weeks after the injury.

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion

What should students do if they believe that they or someone else may have a concussion? • Students feeling any of the symptoms set forth above should immediately tell their Coach and their parents. Also, if they notice any teammate evidencing such symptoms, they should immediately tell their Coach. • **The student should be evaluated.**

A licensed physician of medicine or osteopathic medicine (MD or DO), sufficiently familiar with current concussion management, should examine the student, determine whether the student has a concussion, and determine when the student is cleared to return to participate in interscholastic athletics.

- **Concussed students should give themselves time to get better.** If a student has sustained a concussion, the student's brain needs time to heal. While a concussed student's brain is still healing, that student is much more likely to have another concussion. Repeat concussions can increase the time it takes for an already concussed student to recover and may cause more damage to that student's brain. Such damage can have long term consequences. It is important that a concussed student rest and not return to play until the student receives permission from an MD or DO, sufficiently familiar with current concussion management, that the student is symptom-free.

How can students prevent a concussion? Every sport is different, but there are steps students can take to protect themselves.

- Use the proper sports equipment, including personal protective equipment. For equipment to properly protect a student, it must be:
 - The right equipment for the sport, position, or activity;
 - Worn correctly and the correct size and fit; and
 - Used every time the student Practices and/or competes.
- Follow the Coach's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.

If a student believes they may have a concussion: Don't hide it. Report it. Take time to recover.

I hereby acknowledge that I am familiar with the nature and risk of concussion and traumatic brain injury while participating in interscholastic athletics, including the risks associated with continuing to compete after a concussion or traumatic brain injury.

Student's Signature _____ Date ____/____/____

I hereby acknowledge that I am familiar with the nature and risk of concussion and traumatic brain injury while participating in interscholastic athletics, including the risks associated with continuing to compete after a concussion or traumatic brain injury.

Parent's/Guardian's Signature _____ Date ____/____/____

SECTION 4: UNDERSTANDING OF SUDDEN CARDIAC ARREST & COVID-19 SYMPTOMS AND WARNING SIGNS

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 may cause SCA, but they are not the same. 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 heart to suddenly stop beating. **How**

common is sudden cardiac arrest in the United States?

There are about 350,000 cardiac arrests that occur outside of hospitals each year. More than 10,000 individuals under the age of 25 die of SCA each year. SCA is the number one killer of student athlete and the leading cause of death on school campuses.

Are there warning signs?

Although SCA happens unexpectedly, some people may have signs or symptoms, such as

- Dizziness or lightheadedness when exercising; • Fatigue (extreme or recent onset of tiredness) • Fainting or passing out during or after exercising; • Weakness; and/or
- Shortness of breath or difficulty breathing with exercise, not asthma related; • Chest pains/pressure or tightness during or after exercise.
- Racing, skipped beats or fluttering heartbeat (palpitations)

These symptoms can be unclear and confusing in athletes. Some may ignore the signs or think they are normal from physical exhaustion. If the conditions that cause SCA are diagnosed and treated before a life-threatening event, sudden cardiac death can be prevented in many young athletes.

What are the risks of practicing or playing after experiencing these symptoms? There are risks associated with continuing to practice or play after experiencing these symptoms. The symptoms might mean something is wrong with the athlete and they should be checked before returning to play. When the heart stops due to cardiac arrest, so does the blood that flows to the brain and other vital organs. Death or permanent brain damage can occur in just a few minutes. Most people who experience a SCA die from it; survival rates are below 10%.

Act 73 – Peyton's Law - Electrocardiogram Testing for Student Athletes

The Act is intended to keep student-athletes safe while practicing or playing. Please review the warning signs/symptoms and know that you can request, at your expense, an electrocardiogram (EKG or ECG) to help uncover hidden heart issues that can lead to SCA. **Why Do Heart**

Conditions That Put Youth at Risk Go Undetected?

- Up to 90 percent of underlying heart issues are missed when using only the history and physical exam;
- Most heart conditions that can lead to SCA are not detectable by listening to the heart with a stethoscope during a routine physical; and • Often, youth don't report or recognize symptoms of a potential heart condition.

What is an Electrocardiogram (EKG or ECG)?

An ECG/EKG is a quick, painless and noninvasive test that measures and records a moment in time of the heart's electrical activity. Small electrode patches are attached to the skin of your chest, arms and legs by a technician. An ECG/EKG provides information about the structure, function, rate and rhythm of the heart.

Why Add an ECG/EKG to the Physical Examination?

Adding an ECG/EKG to the history and physical exam can suggest further testing or help identify up to two-thirds of heart conditions that can lead to SCA. An ECG/EKG can be ordered by your physician for screening for cardiovascular disease (**ICD 10 code: Z13.6**) or for a variety of symptoms such as chest pain, palpitations, dizziness, fainting, or family history of heart disease and will generally be paid for by insurance. • ECG/EKG screenings should be considered every 1-2 years because young hearts grow and change.

- ECG/EKG screenings may increase sensitivity for detection of undiagnosed cardiac disease but may not prevent SCA. • ECG/EKG screenings with abnormal findings will need to be evaluated by trained physicians.
- If the ECG/EKG screening has abnormal findings, additional testing may need to be done (with associated cost and risk) before a diagnosis can be made, and may prevent the student from participating in sports for a short period of time until the testing is completed and more specific recommendations can be made.
- The ECG/EKG can have false positive findings, suggesting an abnormality that does not really exist after more testing (false positive findings occur less than 3% of the time when ECG/EKGs are read by a medical practitioner proficient in ECG/EKG interpretation of children, adolescents and young athletes.).
- ECGs/EKGs result in fewer false positives than the current history and physical exam (10%).

The American College of Cardiology/American Heart Association guidelines do not recommend an ECG or EKG in **asymptomatic** patients but do support local programs in which ECG or EKG can be applied with high-quality resources.

Removal from play/return to play

Any student-athlete who has signs or symptoms of SCA must be removed from play. The symptoms can happen before, during, or after activity. Play includes all athletic activity.

Before returning to play, the athlete must be evaluated. Clearance to return to play must be in writing. The evaluation must be performed by a licensed physician, certified registered nurse practitioner, or cardiologist (heart doctor). The licensed physician or certified registered nurse practitioner may consult any other licensed or certified medical professionals.

I have reviewed this form and understand the symptoms and warning signs of SCA. I have also read the information about the electrocardiogram testing and how it may help to detect hidden heart issues.

Student-Athlete Print Student-Athlete's Name Date ____/____/____ Signature of

Parent/Guardian Print Parent/Guardian's Name Date ____/____/____ Signature of

PA Department of Health/CDC: Sudden Cardiac Arrest & COVID-19 Symptoms and Warning Signs Information Sheet Acknowledgement of Receipt and Review Form. 7/2012 PIAA Revised October 7, 2020

Student's Name Age_Grade **SECTION 5: HEALTH HISTORY**

Explain "Yes" answers at the bottom of this form. Circle questions you don't know the answers to.

1. Has a doctor ever denied or restricted your participation in sport(s) for any reason? 2. Do you have an ongoing medical condition (like asthma or diabetes)? 3. Are you currently taking any prescription or nonprescription (over-the-counter) medicines or pills? 4. Do you have allergies to medicines, pollens, foods, or stinging insects? 5. Have you ever passed out or nearly passed out DURING exercise? 6. Have you ever passed out or nearly passed out AFTER exercise? 7. Have you ever had discomfort, pain, or pressure in your chest during exercise? 8. Does your heart race or skip beats during exercise? 9. Has a doctor ever told you that you have

asthma? 26. Have you ever used an inhaler or taken asthma medicine? 27. Were you born without or are your missing organ? a kidney, an eye, a testicle, or any other

passed out or nearly passed out DURING exercise? 6. Have you ever passed out or nearly passed out AFTER exercise? 7. Have you ever had discomfort, pain, or pressure in your chest during exercise? 8. Does your heart race or skip beats during exercise? 9. Has a doctor ever told you that you have

asthma or allergies? 24. Do you cough, wheeze, or have difficulty breathing DURING or AFTER exercise? 25. Is there anyone in your family who has (check all that apply): High blood pressure Heart murmur High cholesterol Heart infection 10.

heart? (for example ECG, echocardiogram) 11. Has anyone in your family died for no apparent reason? 12. Does anyone in your family have a heart problem? 13. Has any family member or relative been disabled from heart disease or died of heart

problems or sudden death before age 50? 14. Does anyone in your family have Marfan Syndrome? 15. Have you ever spent the night in a hospital? 16. Have you ever had surgery?

23. Has a doctor ever told you that you have asthma or allergies? 24. Do you cough, wheeze, or have difficulty breathing DURING or AFTER exercise? 25. Is there anyone in your family who has (check all that apply): High blood pressure Heart murmur High cholesterol Heart infection 10.

heart? (for example ECG, echocardiogram) 11. Has anyone in your family died for no apparent reason? 12. Does anyone in your family have a heart problem? 13. Has any family member or relative been disabled from heart disease or died of heart

problems or sudden death before age 50? 14. Does anyone in your family have Marfan Syndrome? 15. Have you ever spent the night in a hospital? 16. Have you ever had surgery?

23. Has a doctor ever told you that you have asthma or allergies? 24. Do you cough, wheeze, or have difficulty breathing DURING or AFTER exercise? 25. Is there anyone in your family who has (check all that apply): High blood pressure Heart murmur High cholesterol Heart infection 10.

heart? (for example ECG, echocardiogram) 11. Has anyone in your family died for no apparent reason? 12. Does anyone in your family have a heart problem? 13. Has any family member or relative been disabled from heart disease or died of heart

problems or sudden death before age 50? 14. Does anyone in your family have Marfan Syndrome? 15. Have you ever spent the night in a hospital? 16. Have you ever had surgery?

CONCUSSION OR TRAUMATIC BRAIN INJURY
31. Have you ever had a concussion (i.e. bell rung, ding, head rush) or traumatic brain injury?
32. Have you been hit in the head and been confused or lost your memory?
33. Do you experience dizziness and/or headaches with exercise?

17. Have you ever had an injury, like a sprain, muscle, or ligament tear, or tendonitis, which caused you to miss a Practice or Contest?
 If yes, circle affected area below:
 18. Have you had any broken or fractured bones or dislocated joints? If yes, circle below:
 19. Have you had a bone or joint injury that required x-rays, MRI, CT, surgery, injections, rehabilitation, physical therapy, a brace, a cast, or crutches? If yes, circle below:

weakness in your arms or legs after being hit
 36. Have you ever been unable to move your arms or legs after being hit or falling? 37. When exercising in the heat, do you have severe muscle cramps or become ill? 38. Has a doctor told you that you or someone in your family has sickle cell trait or sickle cell disease?
 39. Have you had any problems with your eyes or vision? 40. Do you wear glasses or contact lenses? 41. Do you wear protective eyewear, such as goggles or a face shield? 42. Are you unhappy with your weight? 43. Are you trying to gain or lose weight?
 44. Has anyone recommended you change your weight or eating habits?

34. Have you ever had a seizure? 35. Have you ever had numbness, tingling, or or falling?
 Head Neck Shoulder Upper arm
 Elbow Forearm Hand/ Fingers
 Chest
 eat?
 Upper back
 Lower back
 Hip Thigh Knee Calf/shin Ankle Foot/ Toes

45. Do you limit or carefully control what you 20. Have you ever had a stress fracture? 21. Have you been told that you have or have instability? you had an x-ray for atlantoaxial (neck)
 22. Do you regularly use a brace or assistive device?
FEMALES ONLY 47. Have you ever had a menstrual

46. Do you have any concerns that you would like to discuss with a doctor?
 period? 48. How old were you when you had your first menstrual period?
 49. How many periods have you had in the last 12 months? 50. Are you pregnant?

#s	Explain "Yes" answers here:

I hereby certify that to the best of my knowledge all of the information herein is true and complete.

Student's Signature _____

Date ___/___/___ I hereby certify

that to the best of my knowledge all of the information herein is true and complete.

Parent's/Guardian's Signature _____ Date ___/___/___

SECTION 6: PIAA COMPREHENSIVE INITIAL PRE-PARTICIPATION PHYSICAL EVALUATION AND CERTIFICATION OF AUTHORIZED MEDICAL EXAMINER

Must be completed and signed by the Authorized Medical Examiner (AME) performing the herein named student's comprehensive initial pre-participation physical evaluation (CIPPE) and turned in to the Principal, or the Principal's designee, of the student's school.

Student's Name Age_Grade Enrolled in _____ School Sport(s)

Height _____ Weight _____ % Body Fat (optional) _____ Brachial Artery BP _____/_____/_____ (_____/_____, ____/____) RP _____

If either the brachial artery blood pressure (BP) or resting pulse (RP) is above the following levels, further evaluation by the student's primary care physician is recommended.

Age 10-12: BP: >126/82, RP: >104; **Age 13-15:** BP: >136/86, RP >100; **Age 16-25:** BP: >142/92, RP >96.

Vision: R 20/____ L 20/____ Corrected: YES NO (circle one) Pupils: Equal _____ Unequal _____

MEDICAL	NORMAL	ABNORMAL FINDINGS
Appearance		
Eyes/Ears/Nose/Throat		
Hearing		
Lymph Nodes		
Cardiovascular		<input type="checkbox"/> Heart murmur <input type="checkbox"/> Femoral pulses to exclude aortic coarctation <input type="checkbox"/> Physical stigmata of Marfan syndrome
Cardiopulmonary		
Lungs		
Abdomen		
Genitourinary (males only)		
Neurological		
Skin		
MUSCULOSKELETAL	NORMAL	ABNORMAL FINDINGS
Neck		
Back		
Shoulder/Arm		
Elbow/Forearm		
Wrist/Hand/Fingers		
Hip/Thigh		
Knee		
Leg/Ankle		
Foot/Toes		

I hereby certify that I have reviewed the HEALTH HISTORY, performed a comprehensive initial pre-participation physical evaluation of the herein named student, and, on the basis of such evaluation and the student's HEALTH HISTORY, certify that, except as specified below, the student is physically fit to participate in Practices, Inter-School Practices, Scrimmages, and/or Contests in the sport(s) consented to by the student's parent/guardian in Section 2 of the PIAA Comprehensive Initial Pre-Participation Physical Evaluation form:

CLEARED **CLEARED** with recommendation(s) for further evaluation or treatment for:

NOT CLEARED for the following types of sports (please check those that apply):

COLLISION CONTACT NON-CONTACT STRENUOUS MODERATELY STRENUOUS NON-STRENUOUS Due to

Recommendation(s)/Referral(s)

AME's Name (print/type) License #

Address _____ Phone ()

AME's Signature _____ MD, DO, PAC, CRNP, or SNP (circle one) Certification Date of CIPPE ___/___/___

SECTION 7: RE-CERTIFICATION BY PARENT/GUARDIAN

This form must be completed not earlier than six weeks prior to the first Practice day of the sport(s) in the sports season(s) identified herein by the parent/guardian of any student who is seeking to participate in Practices, Inter-School Practices, Scrimmages, and/or Contests in all subsequent sport seasons in the same school year. The Principal, or the Principal's designee, of the herein named student's school must review the SUPPLEMENTAL HEALTH HISTORY.

If any SUPPLEMENTAL HEALTH HISTORY questions are either checked yes or circled, the herein named student shall submit a completed Section 8, Re-Certification by Licensed Physician of Medicine or Osteopathic Medicine, to the Principal, or Principal's designee, of the student's school.

SUPPLEMENTAL HEALTH HISTORY

Student's Name Male/Female (circle one) Date of Student's Birth: ___/___/___ Age of Student on Last Birthday: ___

Grade for Current School Year: _____

Winter Sport(s): _____ Spring Sport(s): _____

CHANGES TO PERSONAL INFORMATION (In the spaces below, identify any changes to the Personal Information set forth in the original Section 1: PERSONAL AND EMERGENCY INFORMATION):

Current Home Address

Current Home Telephone # () Parent/Guardian Current Cellular Phone # ()

CHANGES TO EMERGENCY INFORMATION (In the spaces below, identify any changes to the Emergency Information set forth in the original Section 1: PERSONAL AND EMERGENCY INFORMATION):

Parent's/Guardian's Name Relationship Address Emergency Contact Telephone # () Secondary Emergency Contact Person's Name

Relationship Address Emergency Contact Telephone # () Medical Insurance Carrier Policy Number Address Telephone # () Family

Physician's Name , MD or DO (circle one)

Address Telephone # () **SUPPLEMENTAL HEALTH HISTORY:**

Explain "Yes" answers at the bottom of this form. Circle questions you don't know the answers to.

1. Since completion of the CIPPE, have you sustained an illness and/or injury that Yes No required medical treatment from a licensed physician of medicine or osteopathic medicine?

2. Since completion of the CIPPE, have you had a concussion (i.e. bell rung, ding, head rush) or traumatic brain injury?

4. Since completion of the CIPPE, have you experienced any episodes of unexplained shortness of breath, wheezing, and/or chest pain? 5. Since completion of the CIPPE, are you taking any NEW prescription medicines or pills? 6. Do you have any concerns that you would like to discuss with a physician?

3. Since completion of the CIPPE, have you experienced dizzy spells, blackouts, and/or unconsciousness? Yes No

#'s	Explain "Yes" answers here:

I hereby certify that to the best of my knowledge all of the information herein is true and complete. Student's Signature _____ Date ___/___/___

I hereby certify that to the best of my knowledge all of the information herein is true and complete. Parent's/Guardian's Signature _____ Date ___/___/___

Section 8: Re-CERTIFICATION BY LICENSED PHYSICIAN OF MEDICINE OR OSTEOPATHIC MEDICINE

This Form must be completed for any student who, subsequent to completion of Sections 1 through 6 of this CIPPE Form, required medical treatment from a licensed physician of medicine or osteopathic medicine. This Section 8 may be completed at any time following completion of such medical treatment. Upon completion, the Form must be turned in to the Principal, or the Principal's designee, of the student's school, who, pursuant to ARTICLE X, LOCAL MANAGEMENT AND CONTROL, Section 2, Powers and Duties of Principal, subsection C, of the PIAA Constitution, shall "exclude any contestant who has suffered serious illness or injury until that contestant is pronounced physically fit by the school's licensed physician of medicine or osteopathic medicine, or if none is employed, by another licensed physician of medicine or osteopathic medicine."

NOTE: The physician completing this Form must first review Sections 5 and 6 of the herein named student's previously completed CIPPE Form. Section 7 must also be reviewed if both (1) this Form is being used by the herein named student to participate in Practices, Inter-School Practices, Scrimmages, and/or Contests in a subsequent sport season in the same school year AND (2) the herein named student either checked yes or circled any Supplemental Health History questions in Section 7.

If the physician completing this Form is clearing the herein named student subsequent to that student sustaining a concussion or traumatic brain injury, that physician must be sufficiently familiar with current concussion management such that the physician can certify that all aspects of evaluation, treatment, and risk of that injury have been thoroughly covered by that physician.

Student's Name: Age Grade Enrolled in _____

_____ School

Condition(s) Treated Since Completion of the Herein Named Student's CIPPE Form:

A. GENERAL CLEARANCE: Absent any illness and/or injury, which requires medical treatment, subsequent to the date set forth below, I hereby authorize the above-identified student to participate for the remainder of the current school year in additional interscholastic athletics with no restrictions, except those, if any, set forth in Section 6 of that student's CIPPE Form.

Physician's Name (print/type) _____ License # _____

Address _____ Phone () _____

Physician's Signature _____ MD or DO (*circle one*) Date _____

B. LIMITED CLEARANCE: Absent any illness and/or injury, which requires medical treatment, subsequent to the date set forth below, I hereby authorize the above-identified student to participate for the remainder of the current school year in additional interscholastic athletics with, in addition to the restrictions, if any, set forth in Section 6 of that student's CIPPE Form, the following limitations/restrictions:

- 1.
- 2.
- 3.
- 4.

Physician's Name (print/type) _____ License # _____

Address _____ Phone () _____

Physician's Signature _____ MD or DO (*circle one*) Date _____

Section 9: CIPPE MINIMUM WRESTLING WEIGHT

INSTRUCTIONS

Pursuant to the Weight Control Program adopted by PIAA, prior to the participation by any student in interscholastic wrestling, the Minimum Wrestling Weight (MWW) at which the student may wrestle during the season must be (1) certified to by an Authorized Medical Examiner (AME) and (2) established NO EARLIER THAN six weeks prior to the first Regular Season Contest day of the wrestling season and NO LATER THAN the Monday preceding the first Regular Season Contest day of the wrestling season (See NOTE 1). This certification shall be provided to and maintained by the student's Principal, or the Principal's designee.

In certifying to the MWW, the AME shall first make a determination of the student's Urine Specific Gravity/Body Weight and Percentage of Body Fat, or shall be given that information from a person authorized to make such an assessment ("the Assessor"). This determination shall be made consistent with National Federation of State High School Associations (NFHS) Wrestling Rule 1, Competition, Section 3, Weight-Control Program, which requires, in relevant part, hydration testing with a specific gravity not greater than 1.025, and an immediately following body fat assessment, as determined by the National Wrestling Coaches Association (NWCA) Optimal Performance Calculator (OPC) (together, the "Initial Assessment").

Where the Initial Assessment establishes a percentage of body fat below 7% for a male or 12% for a female, the student must obtain an AME's consent to participate.

For all wrestlers, the MWW must be certified to by an AME.

Student's Name Age Grade Enrolled in

_____ School

INITIAL ASSESSMENT

I hereby certify that I have conducted an Initial Assessment of the herein named student consistent with the NWCA OPC, and have determined as follows:

Urine Specific Gravity/Body Weight _____ / _____ Percentage of Body Fat _____ MWW _____

Assessor's Name (print/type) _____ Assessor's I.D. # _____

Assessor's Signature _____ Date ____ / ____ / ____

CERTIFICATION

Consistent with the instructions set forth above and the Initial Assessment, I have determined that the herein named student is certified to wrestle at the MWW of _____ during the 20____ - 20____ wrestling season.

AME's Name (print/type) License # Address Phone ()

AME's Signature _____ MD, DO, PAC, CRNP, or SNP Date of Certification ____ / ____ / ____

(circle one)

For an appeal of the Initial Assessment, see NOTE 2.

NOTES:

1. For senior high school wrestlers coming out for the Team AFTER the Monday preceding the first Regular Season Contest day of the wrestling season the OPC will remain open until January 15th and for junior high/middle school wrestlers coming out for the Team AFTER the Monday preceding the first Regular Season Contest day of the wrestling season the OPC will remain open all season.

2. Any athlete who disagrees with the Initial Assessment may appeal the assessment results one time by having a second assessment, which shall be performed prior to the athlete's first Regular Season wrestling Contest and shall be consistent with the athlete's weight loss (descent) plan. Pursuant to the foregoing, results obtained at the second assessment shall supersede the Initial Assessment; therefore, no further appeal by any party shall be permitted. The second assessment shall utilize either Air Displacement Plethysmography (Bod Pod) or Hydrostatic Weighing testing to determine body fat percentage. The urine specific gravity testing shall be conducted and the athlete must obtain a result of less than or equal to 1.025 in order for the second assessment to proceed. All costs incurred in the second assessment shall be the responsibility of those appealing the Initial Assessment.

(please turn page over)

<p>Section 10: 2020-2021 SUPPLEMENTAL ACKNOWLEDGEMENT, WAIVER AND RELEASE: COVID-19</p>
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The COVID-19 pandemic presents athletes with a myriad of challenges concerning this highly contagious illness. Some severe outcomes have been reported in children, and even a child with a mild or even asymptomatic case of COVID-19 can spread the infection to others who may be far more vulnerable.

While it is not possible to eliminate all risk of being infected with or furthering the spread of COVID-19, PIAA has urged all member schools to take necessary precautions and comply with guidelines from the federal, state, and local governments, the CDC and the PA Departments of Health and Education to reduce the risks to athletes, coaches, and their families. As knowledge regarding COVID-19 is

constantly changing, PIAA reserves the right to adjust and implement precautionary methods as necessary to decrease the risk of exposure to athletes, coaches and other involved persons. Additionally, each school has been required to adopt internal protocols to reduce the risk of transmission.

The undersigned acknowledge that they are aware of the highly contagious nature of COVID-19 and the risks that they may be exposed to or contract COVID-19 or other communicable diseases by permitting the undersigned student to participate in interscholastic athletics. We understand and acknowledge that such exposure or infection may result in serious illness, personal injury, permanent disability or death. We acknowledge that this risk may result from or be compounded by the actions, omissions, or negligence of others. The undersigned further acknowledge that certain vulnerable individuals may have greater health risks associated with exposure to COVID-19, including individuals with serious underlying health conditions such as, but not limited to: high blood pressure, chronic lung disease, diabetes, asthma, and those whose immune systems that are compromised by chemotherapy for cancer, and other conditions requiring such therapy. While particular recommendations and personal discipline may reduce the risks associated with participating in athletics during the COVID-19 pandemic, these risks do exist. Additionally, persons with COVID-19 may transmit the disease to others who may be at higher risk of severe complications.

By signing this form, the undersigned acknowledge, after having undertaken to review and understand both symptoms and possible consequences of infection, that we understand that participation in interscholastic athletics during the COVID-19 pandemic is strictly voluntary and that we agree that the undersigned student may participate in such interscholastic athletics. The undersigned also understand that student participants will, in the course of competition, interact with and likely have contact with athletes from their own, as well as other, schools, including schools from other areas of the Commonwealth. Moreover, they understand and acknowledge that our school, PIAA and its member schools cannot guarantee that transmission will not occur for those participating in interscholastic athletics.

NOTWITHSTANDING THE RISKS ASSOCIATED WITH COVID-19, WE ACKNOWLEDGE THAT WE ARE VOLUNTARILY ALLOWING STUDENT TO PARTICIPATE IN INTERSCHOLASTIC ATHLETICS WITH KNOWLEDGE OF THE DANGER INVOLVED. WE HEREBY AGREE TO ACCEPT AND ASSUME ALL RISKS OF PERSONAL INJURY, ILLNESS, DISABILITY AND/OR DEATH RELATED TO COVID-19, ARISING FROM SUCH PARTICIPATION, WHETHER CAUSED BY THE NEGLIGENCE OF PIAA OR OTHERWISE.

We hereby expressly waive and release any and all claims, now known or hereafter known, against the student’s school, PIAA, and its officers, directors, employees, agents, members, successors, and assigns (collectively, "**Releasees**"), on account of injury, illness, disability, death, or property damage arising out of or attributable to Student’s participation in interscholastic athletics and being exposed to or contracting COVID-19, whether arising out of the negligence of PIAA or any Releasees or otherwise. We covenant not to make or bring any such claim against PIAA or any other Releasee, and forever release and discharge PIAA and all other Releasees from liability under such claims.

Additionally, we shall defend, indemnify, and hold harmless the student’s school, PIAA and all other Releasees against any and all losses, damages, liabilities, deficiencies, claims, actions, judgments, settlements, interest, awards, penalties, fines, costs, or expenses of whatever kind, including attorney fees, fees, and the costs of enforcing any right to indemnification and the cost of pursuing any insurance providers, incurred by/awarded against the student’s school, PIAA or any other Releasees in a final judgment arising out or resulting from any claim by, or on behalf of, any of us related to COVID-19.

We willingly agree to comply with the stated guidelines put forth by the student’s school and PIAA to limit the exposure and spread of COVID-19 and other communicable diseases. We certify that the student is, to the best of our knowledge, in good physical condition and allow participation in this sport at our own risk. By signing this Supplement, we acknowledge that we have received and reviewed the student’s school athletic plan.

Date: _____

Signature of Student Print Student’s Name

Signature of Parent/Guardian Print Parent/Guardian's Name

Revised – October 7, 2020

Appendix H

Appendix I

Purpose

The Board of School Directors recognizes the existence and appreciates the efforts of the various community-based booster organizations at work in the school community. The Board further recognizes that the purpose of such organizations should be to assist and support, but not to direct or supplant existing programs. It is absolutely necessary that all Octorara Area School District sponsored activities remain under the control, direction and supervision of the Board and administration.

The Board and administration are cognizant that without countless hours booster club members give to their respective organizations, district programs would suffer. It is recognized by the Board and administration that the impact of each organization is student-centered and, thus, these organizations enhance and contribute in a material way through services, supplies and equipment to district students.

Authority

Being the elected and responsible body for directing all educational and extracurricular programs and activities, the Board sets forth the following policy guidelines to maintain its legal and ethical responsibilities in relation to school booster clubs.

Organizations or groups not in compliance with this policy shall cease and desist from all activities related to district programs, whether in fact or as perceived or implied through its various actions, unless and until they are in compliance with this policy and the Board officially recognizes the organization.

Definition

For purposes of this policy, a **booster club** will refer to any organization comprised of parents/guardians or community members who choose to support an extra or co-curricular activity as defined by Act 82 Article XVI-C of PA Law following formal approval from the Board. Parent-teacher organizations, townships

or parks and recreation youth organizations are not considered school booster clubs.

Guidelines

To initiate a booster club for a particular activity, the following process must be followed:

1. Parents/Guardians or adult sponsors must discuss their intent with the appropriate advisor, principal, or coach.
2. The coach or advisor must then discuss the request with the building principal and/or athletic director as appropriate. If approved by the coach/advisor, the building principal and Superintendent or his/her designee, a formal written request to establish a booster club must be submitted by the requesting organization to the Superintendent for recommendation to the Board for final approval.

Only those booster organizations operating under a constitution and by-laws approved by the Board will be recognized by the district as official and permitted to use the district name, symbols, facilities, property, etc. Organizations deemed to be noncompliant with this policy will not receive Board authorization to operate under any auspices of the district, whether in fact or perception, unless using the facilities rental request as per Board Policy.[1]

The bylaws/constitution of the organization must satisfy the following requirements:

1. The bylaws must be approved by a majority of the group it represents.
2. An annual budget must be approved by the governing body.
3. Two (2) signatures are required on all accounts for disbursement of funds.
4. Statement indicating that coaches and/or district advisors shall not handle funds of the booster club. A coach's/advisor's role in the functioning of the booster club is solely in an advisory capacity. Only the booster club shall control money or accounts of the booster club. Allowing a coach to be responsible for management of funds is in conflict of interest and must be avoided.
5. A process is in place for members to vote upon how funds will be used in order to comply with Act 82 Article XVI-C of PA law.
6. The criteria for membership and voting rights in the organization.
7. The mechanism by which an internal audit is conducted annually. (Note: This may be assigned through bylaws to an audit committee of the membership.)
8. A description of how assets will be disbursed in the event the organization is disbanded. Equipment or funds shall become the property of the district in the event a booster club chooses to disband.

Booster organizations must conduct their activities in a manner that is consistent with the district's policies and administrative guidelines, philosophy, mission and objectives; in compliance with Title IX as observed both as a separate organization and as combined with district programs and initiatives; with Pennsylvania Interscholastic Athletic Association (PIAA) rules and regulations; and with any other

governing body regulating the activity for which the booster organization exists to support.

It is understood by all members of booster organizations that the district shall be responsible for:

1. Supervising athletics, activities, and all district programs.
2. Posting, recruitment, interviewing, selecting, evaluating and monitoring all district personnel. This includes volunteers directly assisting or supervising district students while involved in a district-sponsored activity or event.
3. Selecting, purchasing, using, maintaining and storing of supplies and equipment that are or will become part of the district's inventory.
4. Ensuring that district programs adhere to district, league, state, and federal rules and regulations.
5. Contracting and coordination of officials.
6. Transporting students to and from regular functions and district facilities, not including unscheduled transportation to or from the student's residence or child care provider.
7. Scheduling of competitions and activities
8. Maintaining and administering of all district funds.
9. Determining which types of funds and financial transactions are district responsibilities or booster responsibilities.
10. All decisions concerning district program operations, maintenance, and administration.

Booster clubs/parent support groups shall not require any student to participate in fundraising activities nor pay the equivalent for participation purposes.

Booster clubs/parent support groups shall not require members to pay dues for membership.

Booster organizations will be sports or activity specific and not gender specific.

All gifts, including gifts of equipment, which require installation, storage, or maintenance shall require Board approval. Any such gift donated shall become the property of the district. Forms must be submitted and approved prior to purchase and/or donation to the district.

The district will not be held responsible for any equipment owned by a booster club which is lost, damaged or stolen.

Each booster organization shall provide the following to the athletic director and/or the building principal and Business Manager:

1. A current copy of constitution and by-laws and provide updated copies if these documents are amended.
2. Names of officers and corresponding addresses, telephone numbers, and email addresses and provide updated officer and contact information as the people in these roles change.
3. Annual budget from July 1 - June 30; including organization's name and date submitted to be submitted one month prior to the start of the organization's season.
4. Annual Treasurer's Report or external audit no later than ninety (90) days following the conclusion of the season, or June 30 if a year-round activity, and forwarded to the Board upon request as defined by Act 82 Article XVI-C of PA Law.

The Board does not assume financial responsibility for a booster club and excludes itself from any liability a booster club may incur.

Booster organizations shall not use the district's tax-free number for purchases. Groups should consider filing with the Commission on Charitable Organizations, Department of State, as a charitable nonprofit organization, and they shall follow any IRS State Reporting requirements.

Students are not eligible for membership in any booster club.

A booster club shall not contract with any individual(s) or entities for services that take place on district owned facilities without the prior written approval of the Superintendent.

Such approval will require the individual(s) or entity to maintain a minimum of one million dollar liability insurance policy, and must provide certificates of insurance to the Business Manager.

Booster clubs shall not serve as a lobbying force or special interest group whose purpose is to control or negatively influence the managerial or administrative decisions of the coach, director, advisor, athletic director, building principal or Board.

Fundraising

A **fundraiser** is defined as an activity that solicits monies from the community through donation or a sale of a product or service. Booster clubs may raise funds by food concessions and like activities with preapproval of the building principal or athletic director as appropriate. Fundraising activities that are inconsistent with this policy or with district philosophy will not be permitted.

Fundraising activities for each organization must be submitted to the principal or his/her designee for approval to assure that there is no duplication of items.

Proposals for fundraising activities must include:

1. The name of the organization, contact person, and contact information.
2. Description and purpose of the fundraiser.
3. Groups or businesses to be solicited.
4. The scheduling and length of time for the proposed fundraising activity.

A master list and calendar of approved fundraising projects will be maintained in the appropriate administrative office and distributed electronically as changes occur to each organization's fundraising activities. Contacts must be updated annually or sooner if changes occur.

Disbanding Booster Clubs

1. Should the Board deem that the efforts or activities of any club are not in the best interest of the district, the authorization to operate the club may be withdrawn.
2. Should the booster club fail to submit the required financial reports, the authorization to operate the club may be withdrawn.
3. A booster club may disband on its own accord by submitting in writing a "A Request to Disband a Booster Club."

Exclusion From Liability

The Board does not assume any financial responsibility for a booster club and shall not be responsible for any liability or debt that a booster club may incur.

Legal

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Appendix J

SPORTSMANSHIP

Be courteous to all (Participants, coaches, officials, staff and fans)

Desirable Behavior- Cheerleaders' "Welcome/Good Luck" yells to opposing fans/cheerleaders, combined yells by cheerleader squads to the entire crowd, opposing coaches and players shaking hands after the game; applause during introduction of players, coaches and officials; players shaking hands of opponent fouling out while both sets off and recognize player's performance with applause; all showing concern for injured player; respectfully addressing officials during competition and thanking them for their performance; host school extend hospitality to visiting players, coaches, cheerleaders and fans.

Unacceptable Behavior - Fans reading newspapers, turning their backs, making disrespectful actions, etc., with introduction of opponents; yelling, waving, etc., during opponents free throws; derogatory/disrespectful yells, chants, songs, gestures including "good-bye." "air ball," "you, you, you." "What's the score?" "Wann up the bus" and other such expressions,

Know the rules, abide by and respect the officials' decisions

Desirable Behavior - Utilize every opportunity to promote understanding of the rules of the contest within the school and community; players utilize the team captain or coach for clarification of the call; accept the decisions of the officials; cheerleaders lead fans in positive school yells in a positive manner, cooperate with the news media in interpretation and clarification of the rules.

Unacceptable Behavior- Booing or heckling an officials' decision; criticizing the merits of officiating; displays of temper and arguing with an official's call; derogatory remarks towards officials.

Win with character and lose with dignity

Desirable Behavior - Handshakes between opposing players and coaches at the end of contests, regardless of outcome; opposing players, coaches and fans engaging in friendly conversations before and following the contest; treating competition as a game, not a war; applause at end of contest for performance of all players.

Unacceptable Behavior- Yells that antagonize your opponents, when you feel you have won a game; refusing to shake hands or give recognition to winner or good performance; blame loss on officials, coaching, individual player's performance to other rationalizations; victory celebration on the playing surface.

Display appreciation for good performance repelen of the team

Desirable Behavior- Coach/players seek out opposing participants to recognize them for outstanding performance or coaching; all fans recognize an outstanding participant's performance by applause, regardless of its impact on the contest, discuss outstanding performance of the opponent with visiting and home fans.

Unacceptable Behavior- Laughing, pointing finger, name calling, etc., of opponents in an attempt to distract; to degrade an excellent performance by opponents.

Exercise self-control aaad reflect positivity upon yourself, team and school

Desirable Behavior- Support the activity by learning yells for cheerleaders and displaying total unity as fans in following their lead.

Unacceptable Behavior- Displays of anger, boasting, use of profanity, bouncing beach balls, antics which draw attention to you instead of the contest; doing own yells instead of following lead of cheerleaders; doing unsportsmanlike yells and gestures; such :you, you, you" while pointing finger at fouling opponent.

Permit only positive sportsmanlike behavior to reflect on your school

Desirable Behavior- Positively encourage those around you to display only sportsmanlike conduct; report poor sportsmanship to school officials; member schools insist that sportsmanship be a priority; administrators help coaches to teach, model and reinforce sportsmanship; administrators will take appropriate action to ensure proper behavior.

Unacceptable Behavior- Unwillingness of fans, players, coaches, administrators and member school to get involved and take a stand to defend one of the main tenets of school activities- the teaching and promotion of SPORTSMANSHIP.

Parents

Be a positive role model through your own actions to make sure your athlete has the best athletic experience. Be a "team fan", not a "my kid" fan. Weigh what your children say; they will tend to slant the truth to their advantage. Don't instruct your children before or after the game. because it may conflict with the coach's plans and strategies. Praise student-athletes in their attempts to improve themselves as students, as athletes and as people. Remember that a ticket to a school athletic event is a privilege to observe the contest.

Parents should be sensible, responsible and keep priorities in order. There is a lot more at stake than a win or loss record-Please be a "FAN" and not a "FANATIC"

Appendix K

SPECIALIZATION IN SPORTS

"Young athletes who were injured tended to have more intense specialized training in one sport." Dr. Neeru Jayanthi, medical director of primary care sports medicine at Loyola and senior author of the study was quoted as saying. "We should be cautious about their intense specialization in one sport before and during adolescence. Parents should consider enrolling their children in multiple sports."

Doctor Jayanthi's study provides new support for an American Academy of Pediatrics 2000 policy statement on intensive training and sports specialization in young athletes. The academy said kids should be discouraged from specializing in a single sport before adolescence. Young athletes "should be encouraged to participate in a variety of different activities and develop a wide range of skills"

The study included 85 young athletes who were treated for sports injuries and a comparison group of 69 uninjured athletes who came to Loyola for sports physicals.

Researchers graded athletes on a six-point sports-specialization score: trains more than 75 percent of the time in one sport; trains to improve skill or misses time with friends; has quit other sports to focus on one sport; considers one sport more important than the other sports; regularly travels out of state; trains more than eight months a year. or competes more than six months.

On the six-point scale the average sports-specialization score of uninjured athletes was 2.177, while the average score of injured athletes was 3.49. The study found that 60.6 percent of the injured athletes specialized in one sport. (Athletes who scored above 3 on the six-point scale were considered specialized.)

Uninjured athletes spent a total of 8.8 hours a week playing organized sports, while injured athletes spent 11 hours.

Injuries in young athletes include minor conditions such as muscle strains and knee cap pain, overuse injuries such as rotator cuff tendonitis and OsgoodSchlatter disease (painful lump below the kneecap) and severe injuries such abnormalities in knee cartilage and stress fractures in the spine.