

# TUMWATER SCHOOL DISTRICT MIDDLE SCHOOL ATHLETIC PACKET 2019-2020

Thank you for encouraging your 7th and/or 8th grade student to participate in middle school athletics/activities. We have five different seasons. Our season and athletic offerings are as follows:

August-October	Season 1 Girls Soccer, Football, Co-ed Cross Country, Dance
October-December	Season 2 Girls Basketball, Wrestling,
January-February	Season 3 Boys Basketball, Dance (October-February)
February-April	Season 4 Girls Volleyball
April-May	Season 5 Co-Ed Track

Fees:

- \$40.00 Athletic Participation Fee per sport
- \$25.00 A.S.B. Card – (One time per year purchase)
- Please let us know at the time of signing up if there is a financial hardship

Each year all forms in the Athletic Packet must be completed, signed, and returned to the Middle School ASB Office.

1. Athletic Registration Form
2. Physician Medical Examination (This needs to be completed every year, physician form accepted).
3. Student Parent Consent Form
4. TSD Annual Health History/Emergency Information
5. Athletic Medical Travel Card (Needs to be completed for **each sport**)
6. Travel Release Form (Needs to be completed each time a student is not going to return from the sporting event on the bus).

Welcome to the Tumwater School District Athletic Program. The District's athletic program operates under the guidelines of the Washington Interscholastic Activities Association (WIAA) and complies with the rules and stipulations in the Constitution and Rules and Regulations of the Association.

Mission Statement:

To provide quality, well-rounded, co-curricular programs in which our athletes learn lifelong skills of excellence, discipline, perseverance, competitiveness, cooperation, sportsmanship and dedication. We believe each sport has something unique to offer.

The co-curricular activity program is an integral part of the total school program. The opportunity for participation is open to all students, regardless of individual differences. We promote the opportunity for all students to succeed through participation at an appropriate level. We hold high standards in academics and behavior. Our programs promote and encourage good sportsmanship, teamwork, leadership opportunities, responsibility, self-discipline, and respect for self, others, and the development of skills.

**ANNUAL ATHLETIC CLEARANCE REQUIREMENTS:**

Please complete the following:

- Form 1 Athletic Registration Form
- Form 2 Physician Medical Examination - all first time middle school participants must produce evidence of a physical examination prior to participating in a sport.
- All 8th grade students must produce an updated physical examination prior to participating in a sport.
- If your athlete is going to wrestle, current weight must be provided.
- Any athlete who has been under a doctor's care since their initial physical must have the approval of a health care provider to return to sports.
- Form 3 Parent Consent Form
  - Parent/Student Consent to Participate
  - Review and Sign Athletic Code
  - Review and sign concussion form
  - Review and sign sudden cardiac arrest form
  - *Football Players* - Please read and sign Football Helmet Release
- Form 4 TSD Health/History/Emergency Information
- Form 5 Complete Athletic Travel Card—this will need to be completed for each sport
- Athletes shall not turn age 15 prior to June 1 of the previous school year
- Athletes must meet grade requirement-Students may have no more than 1 D and no F's
- Athletes must not have any fines or fees
- All forms must be on file, and final clearance issued by the ASB office before the student may participate

Thank you for your cooperation and support. If you have any further questions about athletic clearance, please call:

- Nick Reykdal, Athletic Director; Tumwater Middle School 360-709-7500
- Shawn Guthrie, Athletic Director; G.W. Bush Middle School 360-709-7400

## **ACADEMIC REQUIREMENTS**

While the Tumwater School District is aware of the important role that interscholastic athletics play in the development of students, we are also committed to the philosophy that secondary schools are preparing students academically to become productive citizens upon graduation. For these reasons, we have established the following academic standards for our student athletes.

- **ELIGIBILITY POLICIES**

1. Grade checks will occur at the beginning of each season, and then 3 weeks into the season.
2. A student/athlete may not have more than 1 "D". Athletes may not have any "F", or unsatisfactory.
  - a. At grade check if a student has more than 1 "D" or an "F" they will be on probation for 5 (five) school days.
  - b. During the 5 (five) day probation students may practice, but not compete in an event or contest.
  - c. After 5 (five) days, an athlete must obtain a grade check form from the Athletic Director. The student will take the form to each teacher for proof of academic eligibility in order to resume the ability to participate in competitions. After the 5 (five) day probation time, the athlete will work with the school Athletic Director to determine eligibility.
3. After a second consecutive academic ineligible grade, check the athlete will be released from the team for the remainder of the season.

## **ATHLETIC DISCIPLINE**

### **BEHAVIOR EXPECTATIONS**

- All participants should demonstrate positive citizenship in the school building, classroom and athletic program. Conduct, which interferes with the educational process, is prohibited.
- Any participant referred to the administration for disruptive behavior that requires administrative action will be made aware of the possible consequences of his/her actions, and may receive a disciplinary action.
- Any student representing the school in athletic activities must meet the dress and grooming standards established by the school dress code.
- Any display of unsportsmanlike conduct will have consequences. Examples of un-sportsmanship like conduct include; profanity, obscene or vulgar language or gestures, harassment, or taunting.

### **CONSEQUENCES**

If an athlete does not follow the behavior expectations, the following consequences may apply:

- Conference with the student, head coach, and parent/guardian
- Suspension from the next event(s)
- Suspension from team for remainder of season

As per WIAA 18.27.0, when there is an ejection from a contest due to unsportsmanlike conduct, the consequences will be:

- **1st Ejection:** Student will be prohibited from participating in the remainder of that contest, and the next contest.
- **2nd Ejection:** Student is prohibited from participation the remainder of the season.

### **EXCEPTIONAL MISCONDUCT**

Undesirable student behavior requiring administrative action as established in the School Board Policy 3200 will be subject to the following actions:

- **1st Offense:** Suspension for at least the next event. If such behavior occurs after the last scheduled event, the discipline may carry over into the individual's next season.
- **2nd Offense:** Suspension for the remainder of the athletic season.

## **CONDUCT EXPECTATIONS**

Participants are representatives of the Tumwater School District. They are expected to conduct themselves at all times in a manner that reflects the high standards of their team school and community. Participation in co-curricular activities within the Tumwater School District requires that athletes maintain successful performance in academics and citizenship.

## **ATTENDANCE**

- In order to be eligible to **participate in either practice** or competition athletes **must attend the entire school day**.
- The principal or designee will approve any exception to this requirement.
- If an athlete has a medical appointment, the athlete must provide a Doctor's note with date and time in order for the absence to be excused.
- **Students who are serving in-school or out-of-school suspension may not participate in either practice or competition.**
- After school detention is considered an unexcused tardy.

UNEXCUSED ABSENCES-Athletes are expected to attend practice each day

- 1st Offense-Warning to student and coach notifies parents
- 2nd Offense-Student may be suspended from team for the remainder of the season
- Athletes who miss practice on the day before a contest may have limited playing time in that contest.

## **TRAVEL**

Transportation to away events is provided by Tumwater School District. Athletes are expected to travel with the team. Exceptions may be:

- Injury to a participant, which would require alternate transportation
- Travel release form must be completed 24 hour prior to competition.

## **ALCOHOL, TOBACCO, AND OTHER DRUG USE AND POSSESSION**

Consumption, possession, transmission or selling the following prohibited substances: alcoholic beverages, drugs (including anabolic steroids), look-alike drugs, and narcotics or tobacco products including e-cigarettes is prohibited. If an athlete violates these guidelines, the following consequences may apply.

➤ **1st Offense:** Immediate suspension from the team. Should the athlete agree to an assessment and mandatory compliance with the assessment recommendations, the suspension may be reduced to ten (10) school days without competition, commencing from the day of the meeting of the student, head coach, and administrator. During the suspension period, the athlete cannot participate in practice or competition.

➤ **2nd Offense:** An athlete who again violates shall be ineligible for interscholastic competition for a period of one (1) calendar year from the date of the second violation.

➤ **3rd Offense:** An athlete who violates for a third time shall be permanently ineligible for interscholastic competition.

In order to return to participation, the athlete must provide written verification of the results and compliance with the recommendations of the drug/alcohol evaluation to the school administration. School administration will determine the student's status after reviewing the results and recommendations of the drug/alcohol evaluation.

## CONCUSSION INFORMATION

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear.

Sudden Cardiac Arrest (SCA) is the sudden onset of an abnormal and lethal heart rhythm, causing the heart to stop beating and the individual to collapse. SCA is the leading cause of death in the U.S. afflicting over 300,000 individuals per year.

If your child reports any symptoms of concussion or SCA, or if you notice the symptoms or signs of concussion or SCA listed on this form, seek medical attention right away.

### **CONCUSSION Symptoms may include one or more of the following:**

- |  |  |
|--|--|
| <ul style="list-style-type: none"><li>• Headaches</li><li>• “Pressure in head”</li><li>• Nausea or vomiting</li><li>• Neck pain</li><li>• Balance problems or dizziness</li><li>• Blurred, double, or fuzzy vision</li><li>• Sensitivity to light or noise</li><li>• Feeling sluggish or slowed down</li><li>• Feeling foggy or groggy</li><li>• Drowsiness</li><li>• Change in sleep patterns</li></ul> | <ul style="list-style-type: none"><li>• Amnesia</li><li>• “Don’t feel right”</li><li>• Fatigue or low energy</li><li>• Sadness</li><li>• Nervousness or anxiety</li><li>• Irritability</li><li>• More emotional</li><li>• Confusion</li><li>• Concentration or memory problems (forgetting game plays)</li><li>• Repeating the same question/comment</li></ul> |
|--|--|

### **Signs observed by teammates, parents and coaches include:**

Appears dazed  
Vacant facial expression  
Confused about assignment  
Forgets plays  
Is unsure of game, score, or opponent  
Moves clumsily or displays incoordination  
Answers questions slowly  
Slurred speech  
Shows behavior or personality changes  
Can’t recall events prior to hit  
Can’t recall events after hit  
Seizures or convulsions  
Any change in typical behavior or personality  
Loses consciousness

**What can happen if my child keeps on playing with a concussion or returns too soon?**

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often fail to report symptoms of injuries. Concussions are no different. As a result, education of administrators, coaches, parents and students is the key to student-athlete's safety.

**If you think your child has suffered a concussion**

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new "Zackery Lystedt Law" in Washington now requires the consistent and uniform implementation of long and well-established return-to-play concussion guidelines that have been recommended for several years:

"a youth athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time"

**and**

"...may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider".

You should also inform your child's coach if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

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**For current and up-to-date information on concussions you can go to:**

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<http://www.cdc.gov/ConcussionInYouthSports/>



TUMWATER SCHOOL DISTRICT  
MIDDLE SCHOOL ATHLETIC CLEARANCE

Tumwater School District Athletic Department  
ATHLETIC REGISTRATION FORM

Athlete's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Athlete is **enrolled** at  Tumwater Middle School  G. W. Bush Middle School

If not, school attending? \_\_\_\_\_

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Parent/Guardian Name

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Address

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Home Phone

Cell Phone

Cell Phone

Business Phone

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E-mail Address

Alternate E-mail Address

(If a guardian cannot be reached)

Emergency Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

INSURANCE VERIFICATION

School districts **REQUIRE INSURANCE COVERAGE** as a prerequisite for a participation in interscholastic activities. Please complete the following information:

Yes, we have the following medical insurance:

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Name of Insurance Company

Policy Number (required)

My student athlete is covered by the insurance listed above, and I will continue to keep it in force throughout the school year. Therefore, I do not wish to enroll my student athlete in the School Accident Coverage Plan. The principal or designee is authorized to contact the company named above to verify coverage limitations.

No my student will pick up an insurance packet for the School Accident Coverage Plan, which must be completed **prior to eligibility clearance.**

**I accept full responsibility for the cost of treatment for any injury, which he/she may suffer while taking part in the program.**

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Parent/Guardian (Please Print)

Date

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Parent/Guardian Signature

**PARENT/STUDENT CONSENT FORM**

**CONSENT TO PARTICIPATE**

Our son/daughter has chosen to participate in a school district athletic program. We realize that some athletic sports are more dangerous than others are. Accidents can happen and the risk of serious injury and/or death does exist. By signing below we are verifying that we have read and been advised of this information.

I hereby give consent for my son/daughter to engage in interscholastic activities provided by the Tumwater School District. I also give my consent for my child to travel with the team on out of town trips.

\_\_\_\_\_  
Parent/Guardian Signature Date

This application to compete in interscholastic athletics is entirely voluntary on my part and is made with the understanding that I have not violated any of the eligibility rules and regulations of the state association.

\_\_\_\_\_  
Parent/Guardian Signature Date  
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**ATHLETIC CODE**

My student/athlete and I have **READ** the Mission Statement, Expectations, Academic Requirements, and the Athletic Discipline Guidelines of the Athletic Code. We understand the responsibility that is placed upon the participating student/athlete to meet all expectations. By signing below, we agree that we have **read and agree** to abide by the athletic guidelines.

\_\_\_\_\_  
Parent/Guardian Signature Date

\_\_\_\_\_  
Athlete Student Signature Date  
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**CONCUSSION INFORMATION – I have read the concussion information sheet**

\_\_\_\_\_  
Parent/Guardian Signature Date

\_\_\_\_\_  
Athlete Student Signature Date  
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**SUDDEN CARDIAC ARREST INFORMATION-I have read the cardiac arrest information sheet**

\_\_\_\_\_  
Parent/Guardian Signature Date

\_\_\_\_\_  
Athlete Student Signature Date  
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**FOOTBALL HELMET RELEASE**

Football players and parents must read the statement below and sign this release prior to the first practice.

DO NOT strike an opponent with any part of the helmet or facemask. This is a violation of football rules and may cause severe brain or neck injury, including paralysis or death. Severe brain or neck injury may also occur accidentally while playing football. No helmet can prevent all injuries. You use this helmet at your own risk.

\_\_\_\_\_  
Parent/Guardian Signature Date

\_\_\_\_\_  
Athlete Student Signature Date

TUMWATER SCHOOL DISTRICT  
MIDDLE SCHOOL ATHLETIC CLEARANCE

TUMWATER SCHOOL DISTRICT  
MIDDLE SCHOOL  
ATHLETIC MEDICAL TRAVEL CARD

**THIS FORM MUST BE COMPLETED AT THE BEGINNING OF EACH SPORT**

Student Name \_\_\_\_\_ Sport \_\_\_\_\_ Gender M \_\_\_\_\_ F \_\_\_\_\_  
Birth Date \_\_\_\_\_ Grade \_\_\_\_\_  
Parent/Guardian Name \_\_\_\_\_ Phone \_\_\_\_\_  
Work Phone Mother \_\_\_\_\_ Father \_\_\_\_\_  
Cell Phone Mother \_\_\_\_\_ Father \_\_\_\_\_

Alternative Person(s) to be notified in case of emergency:

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Specify any allergies or other medical conditions your child has which first-aid personnel should be aware of

\_\_\_\_\_

Regular medications \_\_\_\_\_

Does your student use or carry an inhaler Yes \_\_\_\_\_ No \_\_\_\_\_

In case of illness, accident or emergency involving this student, the principal or coach is authorized to act on my behalf if I cannot be contacted, and I hereby give permission for a medical doctor to do what is necessary to maintain the health of this student. I realize that Tumwater Middle School does not carry medical insurance for students.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

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**OFFICIAL OFFICE USE ONLY**

This is to verify that the above-mentioned student has completed all the necessary athletic/activity forms and they are on file in the ASB Office at their Middle School. He/she is responsible for giving this completed form to the coach, at which time the student is eligible to participate. This form needs to be completely filled out and returned to the coach for each sports season in which the student/athlete participates.

SPORT \_\_\_\_\_ PARTICIPATION FEE PAID \_\_\_\_\_ ASB CARD PURCHASED \_\_\_\_\_

AUTHORIZED STAFF SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

TUMWATER SCHOOL DISTRICT  
MIDDLE SCHOOL ATHLETIC CLEARANCE

PHYSICIAN MEDICAL EXAMINATION  
MIDDLE SCHOOL

All athletes who wish to participate in interscholastic athletics must pass a physical examination by a licensed health provider prior to the first turnout. Students entering 7th or 9th grade or any student new to the District will need a complete sports physical. All other students will need an annual updated evaluation reviewing their medical history since their last examination. The physician’s examination form must be on file in the office. Doctors may require a full physical based on an athlete’s needs.

I examined \_\_\_\_\_ on \_\_\_\_\_  
Please Print Student Name Date

and find him/her physically fit and able to participate in interscholastic activities that are provided by the Tumwater School District

With no limitations; or

With limitations as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Licensed Health Provider Signature**

\_\_\_\_\_  
**Date**

**REQUIRED INFORMATION FOR WRESTLERS**

**MEDICAL REQUIREMENT FOR WRESTLERS ONLY!!!!**

I recommend that the student designated above should not be allowed to wrestle at any weight LESS than the weight range circled:

75-81	82-86	87-91	97-101	102-106
107-111	112-116	117-121	122-127	128-133
134-141	142-151	152-160	161-172	Other