

HARDWICK ELEMENTARY ATHLETICS

Philosophy: Hardwick Elementary School sports serve the purpose of students learning athletic skills and concepts, teamwork, sportsmanship, and healthy competition in a positive environment where winning games is not viewed as the most important goal.

1. Participation: In order to participate in HES athletic programs, students need to have the following to the Athletic Director prior to the beginning of the season:

- A physical on record with the Athletic Director within the last 2 years.
- A completed athletic participation form.
- A signed parent contract.
- A signed athlete contract.
- Concussion form signed by parent and student.

2. Drug, Alcohol and Tobacco Policy: The use or possession of drugs, alcohol and tobacco are prohibited by students at all times while under the supervision of school staff. Any student found in violation of this policy will be dismissed from their team for the remainder of the season.

3. Absent on game or practice day: Students need to be at school at least ½ a day on the day of games or practices in order to participate in those events.

4. Spectator Expectations: Spectators are expected to conduct themselves in a respectful manner at all times while attending school-sponsored games. The Athletic Director or Coach has the right and obligation to ask individuals who are being disrespectful to officials, players, coaches, or other spectators to leave the playing area where the event is being played.

5. Before Games/Practice: Athletes are NOT ALLOWED to wait inside the school building for practices/games that will occur later in the day. Students who do not abide by this rule will face the following consequences:

- Warning
- One game suspension
- 5 game suspension
- Suspended the remainder of the team games

6. School Cancellation: Practices and games may occur at the discretion of the Athletic Director unless:

- The roads are unsafe for travel as determined by the Athletic Director and Principal.
- Unforeseen events within the school building require the night custodian to work days, i.e. frozen pipes. The Custodial Supervisor will notify the Athletic Director by 10 a.m. if the night custodian will not be available for evening coverage.

7. Tournament Play: Invitations to participate in tournaments must be presented to the Athletic Director at least 1 week in advance of the tournament. All players that are on the team that is invited will be asked by the coach to participate in the tournament.

8. Parental/Guardian complaints:

- Parents should set up a meeting to discuss the issue with the Coach.

- If more issues continue they should let the Athletic Director know. The Athletic Director will schedule a meeting where the Athletic Director, Parents, and Coaches will be present to attempt to resolve the problem.
- If the problems continue, a meeting will be set up with the Parents, Coach, Athletic Director, and Principal.

9. Role and Expectation of the Athletic Director: The position of the Athletic Director is a separate position from the position of physical education teacher. The Athletic Director is responsible for the following:

- Schedule games and practice times.
- Assist the custodians in making sure the gym/field is ready for practice/games.
- Serve as a mediator between parents and coaches who are unable to solve their issues.
- Schedule officials for games.
- Keep track of physicals, participation forms and contracts.
- Order equipment.
- Do the appropriate paper work so coaches and officials will get paid for their services.
- Schedule bussing to away games.
- Communicate with coaches about any schedule changes so coaches can give their players that information.
- Address discipline issues that involve the athletic program.
- Determine with Principal if games should be cancelled because of weather.

10. Role and Expectations of Coaches:

- Be at all games and practices for their team unless circumstances do not allow (funeral, illness, or family emergency).
- Teach athletes skills and concepts, sportsmanship, and rules in a positive atmosphere.
- Model sportsmanship in their coaching by winning without bragging, losing without making excuses, and by treating opponents and officials respectfully.
- Give athletes a fair amount of playing time based on their practice attendance, attitude, and effort.
- Place the well being of their athletes above the desire to win.
- Get the uniforms back from their players at the conclusion of the season.
- Ride the bus with students to and from games.
- Use appropriate language.
- Keep track of players practice attendance.
- Keep open communication with athletes and parents.
- Discuss the progress of each player with appropriate individuals.
- Let players/parents know as soon as possible of any schedule changes when they receive that information from the Athletic Director.
- Bring athlete participation forms to all games and practices.

HES ATHLETIC PARTICIPATION

Requirements for participation in the athletic programs at HES:

- o Parent Permission for participation,
- o Proof of a physical exam within the last 2 years.
- o Completion of the health information form.
- o Completion of concussion requirements.

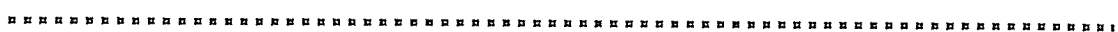


Parent Permission For Participation

I, the parent/guardian of _____ give my permission for him/her to participate in: soccer and/or basketball. (please circle one or both)

Parent/Guardian Signature

Date



HEALTH INFORMATION FORM

This information should be completed and signed by parent and student.

NAME _____

BIRTH DATE _____ AGE _____ GRADE _____

ADDRESS _____

PARENTS/GUARDIANS:	PHONE (H)	PHONE (W)
1. _____		
2. _____		

CELL NUMBER: _____

PERSON TO CONTACT IN CASE OF EMERGENCY _____
Relationship to student _____ PHONE _____
PHYSICIAN _____ PHONE _____
DENTIST/ORTHODONTIST _____ PHONE _____

(continued)
ALLERGIES _____

SPECIAL HEALTH CONSIDERATIONS _____

MEDICATIONS _____

REASONS FOR USE _____

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PERMISSION FOR TREATMENT

To the parent/guardian: In case of injury acquired during interscholastic competition, athletic practice, on school grounds, or during a school sponsored activity, I hereby consent to have the above named student examined and, if required, to be treated by a physician or hospital. I am of the understanding that in case of injury, the school will make every effort to contact me prior to taking the student to a physician or hospital. In the event I cannot be notified, the school and its representative have my permission to take appropriate steps to insure the safety and well being of this student.

I, the parent/guardian of _____, give permission to the authorized personnel of HARDWICK ELEMENTARY SCHOOL to sign for treatment in case of accident or injury.

Parent/Guardian

Date

Student

Date

PLEASE RETURN THE COMPLETED FORM TO TAMMI SMITH. ATTACH THE PROOF OF PHYSICAL EXAM WITH PHYSICIAN'S SIGNATURE.

PARENT CONTRACT

As a parent/guardian whose child is participating in Hardwick Elementary School after school sports I understand to the following expectations, rules and regulations:

1. I will encourage good sportsmanship by demonstrating support for all players, officials, and coaches at every practice and game that I attend.
2. I will remember that the game is being played for the children and not for adults.
3. I will act respectfully at games.
4. I will get my child to practices and games on time and I will make sure they are picked up in a timely manner after practices and games.
5. I will respect Vermont statute T.16 section 140 that states, "No person shall be permitted to use tobacco on public school grounds."
6. I understand pets are not permitted on school grounds.
7. If I have an issue I need to discuss with my child's coach I will make an appointment to meet with him/her to discuss the situation.
8. I acknowledge that I have received information about concussions by Vermont Law (Section 39-41 of Act 58) (S.100 of 2011 in 16 V.S.A.1431). This information includes safety precautions to prevent concussions as well as steps to take in case of suspected concussion.

Print Parent Name _____

Parent Signature _____

STUDENT ATHLETE CONTRACT

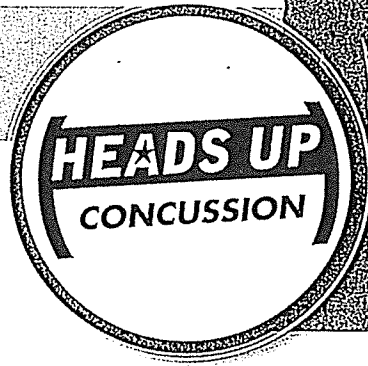
As a participant in Hardwick Elementary School Athletics I agree to the following:

1. I will attend every practice and game that I can and I will be on time for practices and games.
2. I will remember that I **cannot** remain in the school waiting for my games and practices after school.
3. I will work my hardest at practices and games.
4. I will pay attention at practice and games.
5. I will do what the Coach asks me to do to the best of my ability.
6. I will respect Officials and Opponents.
7. I will not put anything into my body that will keep me from doing the best I can with sports.
8. If I have a problem I will talk to my Coach about it.
9. I will treat my Coach respectfully.
10. I will treat my teammates the way I would like to be treated.
11. I will follow team rules.
12. I will make sure that I am doing my best at school.
13. I will remember that I am a representative of Hardwick Elementary School.
14. I understand the information about concussions (Section 39-41 of Act 58) (S.100of 2011 in 16 V.S.A.1431)
15. I will remember to have fun!!!
16. I acknowledge that I have received information about concussions by Vermont Law (Section 39-41 of Act 58) (S.100of 2011 in 16 V.S.A.1431). This information includes safety precautions to prevent concussions as well as steps to take in case of suspected concussion

Print Student Name _____

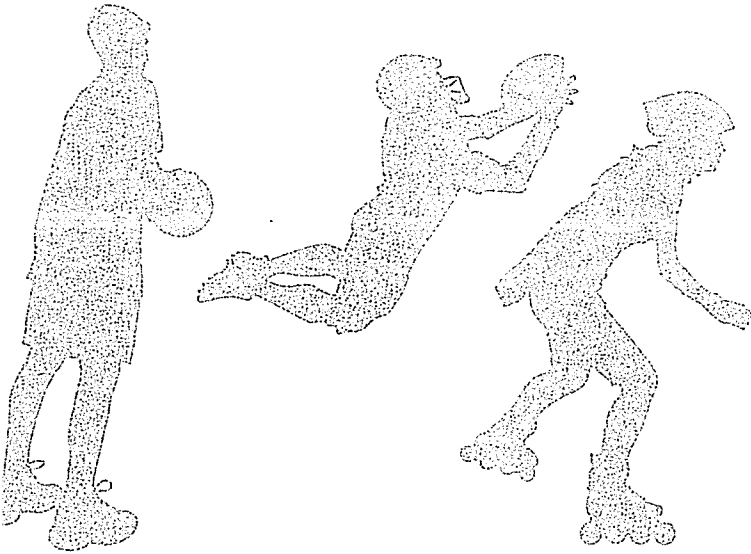
Student Signature _____

CONCUSSION FACT SHEET FOR ATHLETES



CONCUSSION FACTS

- A concussion is a brain injury that affects how your brain works.
- A concussion is caused by a bump, blow, or jolt to the head or body.
- A concussion can happen even if you haven't been knocked out.
- If you think you have a concussion, you should not return to play on the day of the injury and until a health care professional says you are OK to return to play.



CONCUSSION SIGNS AND SYMPTOMS

Concussion symptoms differ with each person and with each injury, and may not be noticeable for hours or days. Common symptoms include:

- Headache
- Confusion
- Difficulty remembering or paying attention
- Balance problems or dizziness
- Feeling sluggish, hazy, foggy, or groggy
- Feeling irritable, more emotional, or "down"
- Nausea or vomiting
- Bothered by light or noise
- Double or blurry vision
- Slowed reaction time
- Sleep problems
- Loss of consciousness

During recovery, exercising or activities that involve a lot of concentration (such as studying, working on the computer, or playing video games) may cause concussion symptoms to reappear or get worse.

WHY SHOULD I REPORT MY SYMPTOMS?

- Unlike with some other injuries, playing or practicing with concussion symptoms is dangerous and can lead to a longer recovery and a delay in your return to play.
- While your brain is still healing, you are much more likely to have another concussion.
- A repeat concussion in a young athlete can result in permanent damage to your brain. They can even be fatal.

WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?

DON'T HIDE IT. REPORT IT.

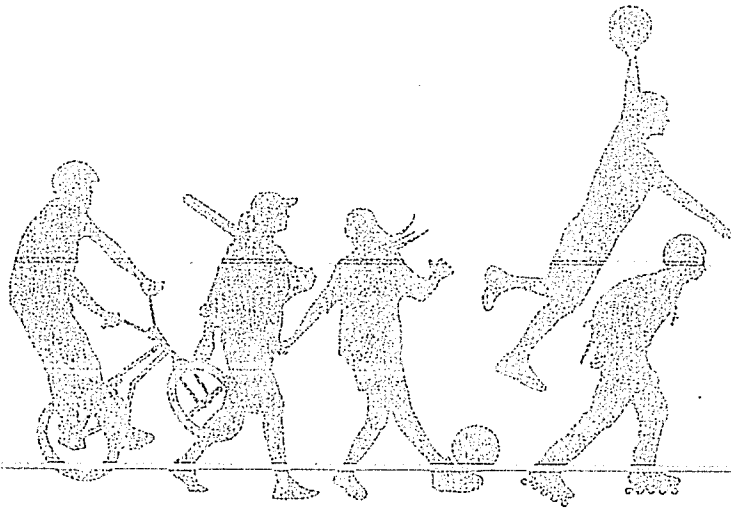
Ignoring your symptoms and trying to "tough it out" often makes symptoms worse. Tell your coach, parent, and athletic trainer if you think you or one of your teammates may have a concussion. Don't let anyone pressure you into continuing to practice or play with a concussion.

GET CHECKED OUT.

Only a health care professional can tell if you have a concussion and when it's OK to return to play. Sports have injury timeouts and player substitutions so that you can get checked out and the team can perform at its best. The sooner you get checked out, the sooner you may be able to safely return to play.

TAKE CARE OF YOUR BRAIN.

A concussion can affect your ability to do schoolwork and other activities. Most athletes with a concussion get better and return to sports, but it is important to rest and give your brain time to heal. A repeat concussion that occurs while your brain is still healing can cause long-term problems that may change your life forever.



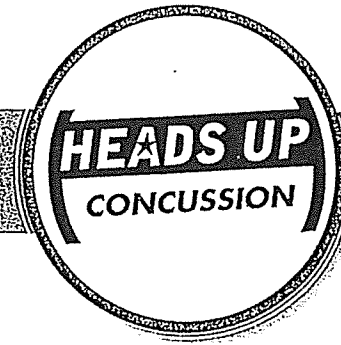
**"IT'S BETTER TO MISS ONE GAME,
THAN THE WHOLE SEASON."**

JOIN THE CONVERSATION AT  www.facebook.com/CDCHeadsUp

TO LEARN MORE GO TO  WWW.CDC.GOV/CONCUSSION

Content Source: CDC's Heads Up Program. Created through a grant to the CDC Foundation from the National Operating Committee on Standards for Athletic Equipment (NOCSAE).

HEADS UP CONCUSSION ACTION PLAN



IF YOU SUSPECT THAT AN ATHLETE HAS A CONCUSSION, YOU SHOULD TAKE THE FOLLOWING STEPS:

1. Remove the athlete from play.
2. Ensure that the athlete is evaluated by a health care professional experienced in evaluating for concussion. Do not try to judge the seriousness of the injury yourself.
3. Inform the athlete's parents or guardians about the possible concussion and give them the fact sheet on concussion.
4. Keep the athlete out of play the day of the injury. An athlete should only return to play with permission from a health care professional, who is experienced in evaluating for concussion.

▶ **"IT'S BETTER TO MISS ONE GAME, THAN THE WHOLE SEASON."**

CONCUSSION SIGNS AND SYMPTOMS

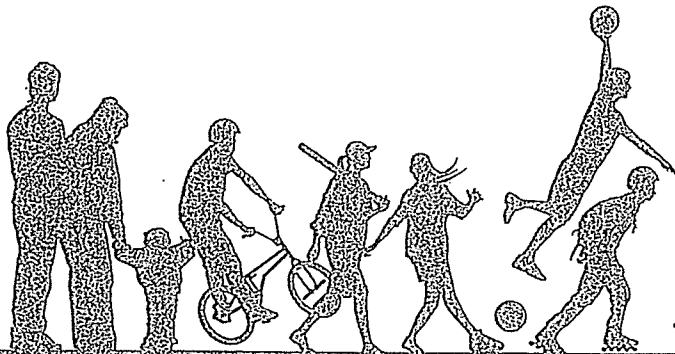
Athletes who experience one or more of the signs and symptoms listed below after a bump, blow, or jolt to the head or body may have a concussion.

SYMPTOMS REPORTED BY ATHLETE

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not "feeling right" or is "feeling down"

SIGNS OBSERVED BY COACHING STAFF

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows mood, behavior, or personality changes
- Can't recall events prior to hit or fall



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