

Haverford High School Athletics



Student and Family Athletic Handbook

Haverford High School Athletic Department
200 Mill Road
Haverford, PA 19083
610-853-5900 ext. 2560

Mr. Pete Donaghy, High School Principal
PDonaghy@haverfordsd.net
610-853-5900 ext. 2511

Mr. Greg Decina, Director of Athletics
GDecina@haverfordsd.net
610-853-5900 ext. 2561

Mrs. Michelle Romano, Athletic Assistant
MDRomano@haverfordsd.net
610-853-5900 ext. 2560





Dear Student-Athletes and Families,

The Haverford High School Athletic Department welcomes you to a wonderful opportunity to participate in and facilitate the growth of your child through education-based athletics. Haverford Athletics is a community-oriented program that seeks to foster school and community pride through our student-athletes, teachers, coaches, administrators, family, and community members.

Extracurricular activities and athletics have a direct impact on our students' success later in life and we are excited to offer such comprehensive opportunities for development.

The Student and Family Athletic Handbook provides families the opportunity to understand the depth of expectations and outcomes for our students who participate in athletics at Haverford High School.

Thank you and we look forward to seeing you at the game!

Sincerely,



Greg Decina | Haverford High School
Athletic Director | Assistant Principal
610-853-5900 ext. 2561
GDecina@haverfordsd.net



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Introduction

Haverford High School Athletics affirms its commitment to the Mission of the School District of Haverford Township and to district goals and the 2020-2025 Strategic Plan as follows:

Mission Statement of the School District of Haverford Township

The mission of the School District of Haverford Township is to educate and inspire a community of lifelong learners who become well-rounded global citizens.

The pillars of our educational system are:

- Our school environment is safe and nurturing.
- Excellence in education is a shared responsibility in partnership with all district and community members.
- Whole child development is vital to our educational system.
- Supports and conditions exist whereby all students have opportunities to grow and excel in the areas of academic, technical and career, and social-emotional learning.
- Our decision-making process is student-centered and student voice is valued.

2020-2025 District Goals

Social/Emotional Wellness

Produce a community of empathetic and resilient learners with skills to socially and emotionally flourish.

Prepare Contemporary Citizens

Modernize and expand learning experiences to prepare students as critical thinkers, problem-solvers, innovators, and designers within a complex, global society.

Diversity and Inclusion

Establish a culturally diverse and inclusive educational experience that develops socio-cultural proficiency.





Haverford High School Athletics Mission Statement

It is the mission of Haverford High School Athletics to develop the growth and character of adolescents. We believe education-based athletics are an extension of the classroom and will help facilitate a positive relationship athletes have with themselves as well as their friends, family, and community. Extracurricular activities improve our students' educational experience and help provide our students with the life skills required to actively contribute to our global society. Through healthy competition, our student-athletes will learn communication, inclusivity, resilience, character, sportsmanship, teamwork, leadership, and cooperation.

Interscholastic and Education-Based Athletics

(As defined by [HTSD Board Policy 123](#))

Purpose: The board recognizes the value of a program of interscholastic athletics as an integral part of the total school experience to all students of the district and to the community.

Definition: The program of interscholastic athletics shall include all activities relating to competitive sports contests, games or events or sport exhibitions involving individual students or teams of students within the district when such events occur between separate schools within this district or with any schools outside this district.

Authority: It shall be the policy of the board to offer opportunities for participation in inter school athletic programs to male and female students on as an equal basis, as is practicable and in accordance with state regulations.

The board shall approve annually a program of interscholastic athletics and shall 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.



Philosophy of Student Co-Curricular Activities

(As defined by [HTSD Board Policy 123](#))

The administrative staff and faculty recognize the value of a comprehensive program of co-curricular activities in the total developmental process of a student. As a result, the athletic and non-athletic activities which are provided by the school district are designed to assist with the physical, social, emotional and moral development of our students.

The activities are also intended to provide for the development of a wholesome, competitive spirit, and a sense of pride and confidence through accomplishment. At no time are these activities to interfere with the primary educational function of the school district, or assume stature that is out-of-line with the objectives of the co-curricular program.

The co-curricular program is an important and integral part of the total school program and is open to participation by all students.

Through voluntary participation, the student gives time, energy and loyalty to the program. S/He also accepts the training rules, regulations, and responsibilities which are unique to a co-curricular program. In order to contribute to the welfare of the group, the pupil must willingly assume these obligations.

Participation in interscholastic athletics where students represent the school or in any other co-curricular activity is a privilege and student conduct must be beyond reproach.

The Code of Conduct for students involved in co-curricular activities does not supersede the "Code of Student Behavior", but will be used by sponsors and coaches to ensure that all students involved in activities are treated uniformly and fairly.

Each program may establish additional rules which apply specifically to that program, but these rules cannot supersede the items contained in this code.



Athletic Department Contact Information

Greg Decina

Athletic Director/Assistant Principal

GDecina@haverfordsd.net

610-853-5900 Ext. 2560

Michelle Romano

Athletic Assistant

MDRomano@haverfordsd.net

610-853-5900 Ext. 2561

Pete Donaghy

Principal

PDonaghy@haverfordsd.net

610-853-5900 Ext. 2511

Keith Heinerichs

Fall Seasonal Athletic Advisor

KHeinerichs@haverfordsd.net

Luke Dougherty

Winter Seasonal Athletic Advisor

LDougherty@haverfordsd.net

Kevin Clancy

Spring Seasonal Athletic Advisor

KClancy@haverfordsd.net

Brendan Boas

Athletic Trainer

BBoas@haverfordsd.net

David Andreozzi

Athletic Trainer

DAndreozzi@haverfordsd.net

Haverford Athletics Social Media

Social media is used to celebrate and promote our student-athletes and teams.



[@HPrideAthletics](https://twitter.com/HPrideAthletics)



[@HPrideAthletics](https://www.instagram.com/HPrideAthletics)



Coaches' Directory
Haverford High School

Fall Sports Season Start Date: August 14, 2023		
<p align="center"><u>Football</u></p> <p>Joe Jones Freshman Coach JJones@haverfordsd.net</p> <p>Brian Hulea JV Coach BHulea@haverfordsd.net</p> <p>Luke Dougherty Varsity Coach LDougherty@haverfordsd.net</p>	<p align="center"><u>Volleyball (G)</u></p> <p>Janet Wright Freshman Coach mswright2017@gmail.com</p> <p>Eric Dahl JV Coach e.dahl@verizon.net</p> <p>Alin Bilc Varsity Coach alinbilc@yahoo.com</p>	<p align="center"><u>Field Hockey</u></p> <p>Kristen Trimboli JV-B Coach KTrimboli@haverfordsd.net</p> <p>Sandra Johnston JV Coach SJohnston@haverfordsd.net</p> <p>Christa Taylor Varsity Coach CTaylor@haverfordsd.net</p>
<p align="center"><u>Boys Soccer</u></p> <p>Chris Gallagher Freshman Coach CGallagher@haverfordsd.net</p> <p>Howard Greenberg JV Coach Hgreenberg741@gmail.com</p> <p>Michael Klemens Varsity Coach MKlemens@haverfordsd.net</p>	<p align="center"><u>Girls Soccer</u></p> <p>Beth Greenwald JV-B Coach EGreenwald@haverfordsd.net</p> <p>Nancy McGoldrick JV Coach NMcGoldrick@haverfordsd.net</p> <p>Jeff Jackson Varsity Coach JJackson@haverfordsd.net</p>	<p align="center"><u>Cross Country (B & G)</u></p> <p>Laura Clinton Girls Head Coach LClinton@haverfordsd.net</p> <p>Matt Wells Boys Head Coach MWells@haverfordsd.net</p>
<p align="center"><u>Girls Tennis</u></p> <p>Bill Whitney JV Coach BWhitney@haverfordsd.net</p> <p>Phil Goldsmith Varsity Coach PGold4110@haverfordsd.net</p>	<p align="center"><u>Golf</u></p> <p>Tim McCormack JV Coach TMcCormack@haverfordsd.net</p> <p>Jim Knapp Varsity Coach James.Knapp210@gmail.com</p>	<p align="center"><u>Cheerleading</u></p> <p>Joanna Turner JV Coach JTurner19083@gmail.com</p> <p>Maria Saffern Varsity Coach mariadi126@gmail.com</p>



Winter Sports

Season Start Date: November 17, 2023

Girls Basketball

Brian Hulea
Freshman Coach
BHulea@haverfordsd.net

Molly Hanlon
JV Coach
Mhanlon134@yahoo.com

Lauren Pellicane
Varsity Coach
LPellicane@haverfordsd.net

Boys Basketball

Leon Smith
Freshman Coach
LSmith@haverfordsd.net

Jake Mingey
JV Coach
JMingey@haverfordsd.net

Keith Heinerichs
Varsity Coach
KHeinerichs@haverfordsd.net

Wrestling

Jim Knapp
JV Coach
James.Knapp210@gmail.com

Joe Jones
Varsity Coach
JJones@haverfordsd.net

Swim and Dive

Matt Stewart
Varsity Coach
MStewart@haverfordsd.net

Steph Viola
Asst. Coach
SViola@haverfordsd.net

John Scholtz
Dive coach
JScholtz@haverfordsd.net

Winter Track

Ryan Comstock
Head Boys Coach
Coachcomstock@gmail.com

Amber Jenkins
Head Girls Coach
AJenkins@haverfordsd.net

Cheerleading

Joanna Turner
JV Coach
JTurner19083@gmail.com

Maria Saffern
Varsity Coach
mariadi126@gmail.com

Unified Bocce (Club Sport)

Kayla Kishbaugh
Varsity Coach
KKishbaugh@haverfordsd.net

Laurent Herbert
Varsity Coach
LHerbert@haverfordsd.net

Ice Hockey (Club Sport)

John Povey
Varsity Coach
johnpovey@haverfordicehockey.com



Spring Sports Season Start Date: March 4, 2024		
<p align="center"><u>Baseball</u></p> <p>James Coyne <i>Freshman Coach</i> JCoyne817@gmail.com</p> <p>TBD <i>JV coach</i> Email:</p> <p>Brian Miller <i>Varsity Coach</i> BMiller2514@gmail.com</p>	<p align="center"><u>Softball</u></p> <p>Shannon Moore <i>JV-B coach</i> SMoore@haverfordsd.net</p> <p>Bill Whitney <i>JV Coach</i> WWhitney@haverfordsd.net</p> <p>Bob Newman <i>Varsity Coach</i> Ragesoftball@comcast.net</p>	<p align="center"><u>Spring Track and Field</u></p> <p>Ryan Comstock <i>Head Boys Coach</i> Coachcomstock@gmail.com</p> <p>Amber Jenkins <i>Head Girls Coach</i> AJenkins@haverfordsd.net</p>
<p align="center"><u>Girls Lacrosse</u></p> <p>Tim McCormack <i>JV-B Coach</i> TMcCormack@haverfordsd.net</p> <p>Devon Shontz <i>JV Coach</i> DShontz@haverfordsd.net</p> <p>Nancy McGoldrick <i>Varsity Coach</i> NMcGoldrick@haverfordsd.net</p>	<p align="center"><u>Boys Lacrosse</u></p> <p>Cal Britton <i>JV-B Coach</i> CBritton1890@gmail.com</p> <p>Alex Host <i>JV Coach</i> AHost@haverfordsd.net</p> <p>Bryan Arra <i>Varsity Coach</i> Bryan.m.arra9@gmail.com</p>	<p align="center"><u>Volleyball (B)</u></p> <p>Eric Dahl <i>JV Coach</i> E.Dahl@verizon.net</p> <p>Alin Bilc <i>Varsity Coach</i> AlinBilc@yahoo.com</p>
<p align="center"><u>Boys Tennis</u></p> <p>TBD <i>JV and Varsity Coach</i> Email: TBD</p>	<p align="center"><u>Unified Track and Field</u> (Club Sport)</p> <p>Laurent Herbert <i>Varsity Coach</i> LHerbert@haverfordsd.net</p> <p>Joe Jones <i>Varsity Coach</i> JJones@haverfordsd.net</p>	<p align="center"><u>Haverford Ultimate Disc</u> (Club Sport)</p> <p>Simon Feeman <i>Coach</i> huda.ultimatefrisbee@gmail.com</p>



Central Athletic League

[CAL Website](http://www.calweb.org)



Conestoga High School 200 Irish Road Berwyn, PA 19312 Athletic Office 610-240-1023	Garnet Valley High School 552 Smithbridge Rd. Glen Mills, PA 19342 Athletic Office 610-579-7743	Harrilton High School 600 North Ithan Avenue Rosemont, PA 19010 Athletic Office 610-658-3976
Haverford High School 200 Mill Road Havertown, PA 19083 Athletic Office 610-853-5900	Lower Merion High School 315 E. Montgomery Ave. Ardmore, PA 19003 Athletic Office 610-645-1820	Marple Newtown High School 120 Media Line Road Newtown Square, PA 19073 Athletic Office 610-359-4231
Penncrest High School 134 Barren Road Media, PA 19063 Athletic Office 610-627-6219	Radnor High School 130 King of Prussia Road Radnor, PA 19087 Athletic Office 610-293-0855 x3550	Ridley High School 901 Morton Ave. Folsom, PA 19033 Athletic Office 610-237-8034 x1204
Springfield High School 49 W. Leamy Ave. Springfield, PA 19064 Athletic Office 610-938-6185	Strath Haven High School 205 S. Providence Road Wallingford, PA 19086 Athletic Office 610-892-3470	Upper Darby High School 601 N. Lansdowne Ave. Upper Darby, PA 19082 Athletic Office 610-622-7000 x372





Affiliation with Pennsylvania Interscholastic Athletic Association (PIAA)

The Haverford Township School District's Athletic Program at both the middle and high school adheres to the constitution and by-laws of the Pennsylvania Interscholastic Athletic Association (P.I.A.A.). Parents are invited to visit PIAA.ORG for PIAA information. The school is responsible for the athletic program. At both our middle and high schools. The Director of Athletics/ as the principal's designee/ administers the program.

The P.I.A.A. is divided into 12 districts. Haverford High School is part of District One which includes Bucks/ Chester/ Delaware/ and Montgomery counties

Visit the PIAA website for more details at PIAA.org.





Eligibility for Interscholastic Athletics

Academic Curricular Eligibility Standards and Requirements

(PIAA Constitution and [HTSD Board Policy 123](#))

To be eligible for interscholastic athletic competition, a pupil must carry and pass a minimum of two (2) courses, which meet five days per week each quarter. A pupil who does not meet this standard shall be ineligible. (PIAA Article X)

Beginning of Each School Year/Grading Period

A student is eligible for interscholastic athletic competition if, at the end of the previous school year, his/her final grades and credits indicate passing grades the above requirement. A pupil whose work does not meet this standard and who attends summer school correcting his/her deficiencies will be eligible.

A pupil who is not passing the required course work will be ineligible for athletic competition for the first 15 school days of the next grading period.

Weekly Eligibility

Except as provided above... "eligibility shall be cumulative from the beginning of a grading period and shall be reported on a weekly basis."

A pupil who does not meet this standard shall be ineligible to participate in interscholastic athletics for one week (Monday through Saturday) except when school is not in session during winter and spring breaks. At that time, the period of eligibility will extend to Saturday of the first week back to school.

Coaches of fall sports will verify their rosters with the athletic director at the beginning of the school year. Pupils who were ineligible at the end of the previous school year may practice but may not participate in any scrimmage or contest for the first 15 days of school.

In September, weekly eligibility will begin. Head coaches, as well as JV, JVB and freshman coaches, will then receive a report each Monday (see "Weekly Eligibility" above). Athletes who are ineligible or in danger of becoming ineligible for play should be counseled.

All athletes and their parents must be aware of the minimum amount of credits that each pupil must carry. Haverford High School requires that athletes pass in accordance with the eligibility as outlined by the PIAA. These requirements are stated in the PIAA Handbook which can be reviewed at PIAA.org. For additional information regarding eligibility, see the Code of Conduct.

[Appendix A-1: HTSD Board Policy 123](#)



Support System

The athletic office will assist in identifying students who are “at risk” students (those who appear to be in jeopardy of becoming ineligible) and those students who are ineligible via weekly eligibility report per PIAA policy.

The Athletic office will inform the coach, counselor, teachers, and administration regarding the students who are at risk. Counselors will assess the nature of each student’s problem by utilizing his/her as well as the teacher’s knowledge and understanding of each student. Counselors and teachers will attempt to ensure that the student has appropriate and adequate tutorial assistance, which may include the regular teachers. Counselors will monitor each student’s remedial plan and will communicate with the student’s parent(s)/guardian(s), The Athletic Director and Principal.

More information regarding student services and supports can be found on the HHS Counseling Website.

Attendance and Lateness Policy

[*\(HTSD Board Policy 123\)*](#)

Haverford High School Regulation regarding lateness to school and missed classes

Students who wish to participate in athletics (practices or contests) and/or activities must be in attendance at school by 10:46 AM and remain in school on that day.

1. Students leaving school early for regular scheduled contests will be considered present in school. The athlete is responsible for making up missed class work.
2. When an athlete misses school for league/ sectional, regional, or state playoffs or big meets, coaches need to provide a list of names to the athletic director. The Athletic/Activities Office shall notify the professional staff including the grade-level office so that pupils may be counted as present. Again, the athlete is responsible for making up missed work.
3. Anticipated absence ~ students who plan to miss school because of college visitation should give prior notice to coaches and the Athletic Office.
4. Suspension ~ any student who is serving a suspension may not participate in any activity or athletic practice or contest during the time of suspension.
5. If a student leaves the school during the day due to illness, the student cannot participate in athletic practice or contest on that day.
6. Exceptions will be made if the student has an approved medical or educational excuse scheduled prior to the date of absence.



Dual-Sport/Activity Participation

Haverford High School is committed to educating the whole child and providing a well-rounded opportunity for our student-athletes. We encourage student-athletes to participate in multiple sports and activities and to learn the values of commitment through co-curricular activities. The following guidelines are designated to provide guidance if multiple sports and/or activities conflict...

1. The student-athlete shall contact the head coach or club sponsor at least two weeks before practice begins and will declare a primary sport/activity. Participation in the primary sport will take precedence if there is an unavoidable schedule conflict.
2. Before practice begins, the coaches and/or sponsors will meet to develop a practice and competition schedule for the student-athlete's participation. The Athletic Director may be asked to become involved for input or to resolve differences of opinion.
3. The Development of the student-athlete's schedule of practice and competition shall be the sole responsibility of the coaches and Athletic Director.
4. Dual Sport/Activity contract: The Dual sport/activity contract shall include the primary and secondary activities, practice, and competition schedules, and shall be signed by all parties (student, guardian, coaches and/or sponsors, and athletic director).

[Appendix A-2: Dual-Sport/Activity Participation Contract](#)

Out of School Sport Participation

Out of school participation, including private lessons, shall not be permitted during scheduled practices and interscholastic events.



Transfers

(PIAA Constitution- Article VI)

You are considered a transfer student/athlete when you change schools, or if you are out of school for a period of time before entering the new school. The first time you transfer from one school district to another you are eligible immediately at the new school/ except:

1. When you live with your natural or adoptive parents in the new school district.
2. When you live with a court-appointed legal guardian in the new school district, upon approval of the P.I.A.A. District Committee.

If you are not eligible immediately/ if your transfer is not your first, or if you transfer between public and private schools or between private schools/ the principals of both schools/ or the appropriate P.I.A.A. District Committee/ will determine whether your transfer was in whole or in part for any athletic purpose **or** as a result of recruiting. If it was not/ you will be ruled eligible immediately upon that determination.

If you transfer from one school to another in whole or in part for any athletic purpose, or if you were recruited, you will lose your athletic eligibility in all sports for one year. This requirement applies even if you would otherwise be eligible at the school to which you transferred.

Most students who are not eligible immediately will be ineligible for one year from the date of transfer in each sport in which they participated within one year preceding the date of transfer.

Age and Eligibility

(PIAA Constitution- Article I)

Athletes must not have reached their 19th birthday by June 30 immediately proceeding the school year (15th birthday where interscholastic competition limited to grades seven and eight; 16th birthday where competition is limited to grades seven through nine).

Amateur status

To be eligible to participate in a sport, students must be an amateur in that sport. Amateur status is lost for a year if:

1. The student/ or school or organization the student represents, or parents or guardian of the student/ receive money or property related to your athletic ability/ performance/ participation, or services.
2. A student accepts compensation for teaching, training/ coaching in a sport. A student may receive normal and customary compensation for acting as an instructor in or officiating recreational activities, or for serving as a lifeguard at swimming areas.



Athletic Awards and Eligibility

Students who represent Haverford Senior High School in interscholastic athletic contests have been recognized for many years through a program of awards presented by the Haverford High School Athletic Department. The following guidelines have been adopted as the basis for the awarding of varsity, junior varsity, and freshmen letters.

1. Eligibility for athletic awards are determined through the degree of participation by the athlete in scheduled contests. To be eligible for sport-specific athletic awards, student-athletes should participate in two-thirds of the scheduled contests.
2. Any member of an athletic squad meeting the letter requirements set forth herein shall be awarded a letter if it is the first letter earned in that sport. Persons earning subsequent letters in the same sport will receive a certificate and pin.
3. To qualify for an award, an athlete must finish their sport season in good standing. An athlete can be disciplined during a season and still finish the season in good standing, but participation missed due to disciplinary action cannot be credited toward earning an award.
4. Any student whose conduct or sportsmanship is in question by a faculty member or coach may be considered not in good standing and subsequently may be barred from consideration for a letter.
5. An athlete missing playing time because of ineligibility due to academic or attendance deficiency may not receive credit for participation.
6. Students who legally transfer into the school district during an athletic season and participated on a Haverford team during that season will be credited for their participation at their previous school district under the guidelines set forth here.
7. Participation in a minimum of six interscholastic contests within a season are necessary before letters will be awarded for a sport. Participation involves playing for a period of time equal to 1/4 of the total playing time in a contest not just a token appearance in a contest for brief periods of time as a substitute. Each sports' managers will receive coaches' written recommendations. No more than two managers of any sport will be awarded letters.
8. Exceptions to any and all regulations listed above can be made upon the recommendation of the coach and approval of the Director of Athletics.



Health and Safety Protocols

Physical Examinations for Student Athletes

(PIAA Constitution- Article V and [HTSD Board Policy 123](#))

Requirement: Student-Athletes Require a PIAA Physical Examination or CIPPE form be completed after June 1, uploaded to Family ID, and approved by the HHS Athletic trainers prior to participation in athletics.

Purpose: The School District of Haverford Township seeks to provide all students who desire to participate in athletic events the safest possible condition for participation. Every child seeking to participate in athletics will therefore be required to submit the results of a physical examination on the approved Pennsylvania Interscholastic Athletic Association's Parent Certificate and the Haverford Township School District Physician's Certificate.

The Pennsylvania Interscholastic Athletic Association permits that a comprehensive pre-participation physical evaluation be certified on a cycle beginning June 1 and ending May 31 of each school year. If the student has an annual physical on file, parents must submit Section 7 of the physical form each season of play. If an injury has occurred during the season of play the student will be required to provide a Physician's note granting the student permission to be reinstated back into participation.

A student must have a physical examination on file with the school district prior to any participation in an athletic contest or practice session.

Guidelines: Such physical examination shall be at the expense of the student(s) or his/her parent(s) or guardian(s). If documentation exists (such as eligibility for reduced or free lunch) that indicates that the required physicals are a financial hardship, the School District will review and assist in payment for medical evaluations required for participation.

The parents/guardians of students who seek to participate in athletics shall be required to complete an information form that provides school officials with additional information on prospective athletes before athletic participation is approved by the school. Should the Physician's Certificate and/or the Parent Information Form reveal that a child has experienced any physical ailment that places the student's health in jeopardy; the student will be required to have a physical examination to determine if the reported ailments still exist. When the final medical approval is granted and verified by a physician's signature, the child may be cleared for participation.

Participation will be denied if the Physician's Certificate reveals any medical problem experienced by the prospective athlete that might be determined as life or health threatening.



Any athlete who has sustained an injury, or a health problem requiring a physician's care, must receive a medical release from his/her physician before the student may return to athletic participation. The School District, through the appropriate office of the School Principal or his/her designee, may request at any time a second medical evaluation, at the school's expense, if there is doubt regarding the health of a participating student.

Authority: The Board directs the Superintendent to ensure that all school system employees and students be made aware of this policy through proper induction, information, and orientation programs. The Board further directs the Superintendent or designee to develop any authorization, assurance, verification, or release forms necessary to implement the intent of the policy.

[Appendix B-1: PIAA CIPPE Eligibility Documentation](#)



Sports Medicine and Preventative Care

Haverford High School Athletic Trainers

Brendan Boas
BBoas@haverfordsd.net
610-853-5900 Ext. 2107

David Andreozzi
DAndreozzi@haverfordsd.net
610-853-5900 Ext. 2107

General Background and major functions

Athletic trainers are health care professionals who collaborate with physicians to provide injury prevention, emergency care, clinical diagnoses, therapeutic intervention and rehabilitation of injuries and medical conditions. They coordinate with physicians to ensure that student-athletes are receiving the best care possible. The major functions of the athletic trainer are injury prevention, recognition, and evaluation, and the management, treatment, disposition, rehabilitation, organization, and administration, education, and counseling of the athlete.

Qualifications

ATs meet qualifications set by their Board of Certification (National Athletic Trainers' Association) and adhere to the requirements of a state licensing board. The National Athletic Trainers' Association was formed in 1950 to establish professional standards for this evolving paramedical profession. Once certified, they must meet ongoing continuing education requirements. They practice under the direction of a physician. In the SDHT, the high school ATs cover all PIAA games, events and practices.



Athletic Training Coverage

(Premier ATR Contract 2021-2024)

The athletic trainers first priority is to the in-season Haverford High School Student-Athlete beginning on the PIAA-stated date for heat acclimation and ending on the last day of the school year. Coverage would include the following:

1. All home and away varsity football games: coverage of all junior varsity and freshman home games only; designated sites for all home varsity sports contests (football, field hockey, soccer, cross country, volleyball, tennis, golf, cheerleading and/or any other sports); on site for practices.
2. All home basketball, indoor track, cheerleading, swimming meets, and wrestling matches; on site for practice.
3. All home lacrosse, volleyball, softball, baseball games, tennis matches, and track & field; on site for practices.
4. Emergency care and supervision: To provide emergency aid through recognition, care, and approved treatment of all injuries.
 - a. When a school doctor is present (home varsity football) do so under his/her direction.
 - b. Take or send an athlete to a hospital emergency room if necessary. Take or send the athlete's MEDICAL TREATMENT card with him/her.
5. Additional coverage responsibilities include
 - a. Opposing athletes playing contests at Haverford High School.
 - b. Varsity teams in district and state playoff contests away from school when it does not conflict with the first priority.

Preventive Care

1. To provide advice and instruction to coaches for in-season conditioning and training programs as requested by head coaches. This includes warm-up exercises and conditioning programs which involve running, stretching, a strength training.
2. To complete pre-event preparations (preventative taping/ etc.) before each home contest and before bus departure for each away contest.
3. To complete pre-practice preparations (preventative taping, etc.) before each scheduled practice.
4. To oversee first aid kits and instruct coaches on the use of the kit's contents.
5. To train and supervise student-trainers when they are available. This includes defining what a student-trainer MAY and MAY NOT do.

Medication

[\(HTSD Board Policy 210\)](#)

Medication can be distributed by the athletic trainers office only if they are provided directly by a guardian to the athletic trainers office in accordance with HTSD Board Policy 210.



Athletic Training Room Rules

1. Athletes are to report all injuries to the coach and athletic trainer.
2. Athletes must sign-in to the athletic training room treatment log.
3. Athletes must be supervised at all times when in the athletic training room.
4. Students are not permitted in the athletic training room during the school day.
5. All athletic training supplies must be distributed by the trainer.
6. Therapeutic modalities equipment is only to be used with the instruction or supervision of an athletic trainer. Coaches are to be informed of any treatment and the trainer's recommendations.
7. For safety, athletes must avoid overcrowding by waiting outside and leaving bags and equipment in the hallway.
8. Profanity is prohibited in the training room.
9. Ice bags must be emptied and placed in the trash when treatment is completed.
10. Athletes must shower before injury evaluation or treatment.
11. No cleats allowed in the training room, or anywhere in the building.



Concussion Information

1. What is a concussion?

A concussion is a type of traumatic brain injury (TBI) caused by a bump, blow, or jolt to the head that can change the way the brain normally works. Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth. Even what seems to be mild bump or blow to the head can be serious (CDC, 2014). Although most concussions are mild and will resolve completely, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. Proper management of concussion can prevent further injury and help with recovery (CDC, 2014). Children and adolescents are among those at greatest risk of concussion. Most concussions do not result in loss of consciousness. Concussions aren't visible in the same way that other injuries are visible. In fact, most concussions are not visible on CT scans or MRI. Signs and symptoms of concussion can occur right away, at time of impact, or hours or days later. It is important to know the signs and symptoms of concussion. If your child reports any symptoms of a concussion, or if you notice signs and symptoms of concussion, seek medical attention right away.

2. What are the signs and symptoms of a concussion

Symptoms may include, but are not limited to, one or more of the following:

- Headaches
- Pressure in the head
- Neck pain
- Balance problems or dizziness
- Blurred, double, or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish or slowed down
- Feeling foggy or groggy
- Drowsiness
- Changes in sleep patterns
- Nauseous
- Amnesia
- "Don't feel right"
- Fatigue or low energy
- Sadness
- Nervous or anxious
- Irritability
- More emotional
- Confusion
- Concentration or memory problems
- Repeating the same question/comment



3. 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 lack of coordination
- Answers questions slowly
- Slurred speech
- Shows behavior or personality changes
- Can't recall events prior to the hit
- Can't recall events after the hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Any changes in typical behavior or personality
- Loses consciousness
- Throwing up

Adapted from the CDC and the 3rd International Conference on Concussion in Sport

4. What happens if my child has symptoms during competition or practice

Any athlete suspected of sustaining a concussion will be immediately removed from competition or practice for the remainder of that day's activities. The Certified Athletic Trainer will conduct an evaluation of the athlete through the use of established evaluation techniques. If concussion is suspected, the athlete's parent/guardian will be notified by the athletic trainer. Follow up assessment of the student after a suspected concussion must be done by a physician. The Athletic Trainer will notify the School Nurse of students who have sustained concussion to coordinate care in the academic environment.

In the event that an athlete sustains a loss of consciousness, the athlete will be transported to a hospital via 911 for emergency assessment and treatment.

Written medical clearance to return to practice/play following concussion will be determined by the treating physician in collaboration with the Athletic Trainer.



5. When can my child return to practice/play after a concussion?

All concussed athletes must be seen by an MD trained in the evaluation and management of concussions for written clearance to start the "return to play" progression. It is recommended that the athlete be under the care of a MD who is not the parent/guardian or immediate family member. Athletes who have signs or symptoms of concussion or abnormal cognitive testing may not return to play on the day of the injury. Athletes who have been diagnosed with concussion will need to advance through a stepwise return to play progression implemented by the Athletic Trainer and the physician before returning to full play. These 5 steps must be completed over a minimum of 7 days. Each step must be at least 24 hour apart. If at any time the symptoms return, the athlete must rest for at least 24 hours and repeat the step. The AT will contact the parent/guardian if the student athlete complains of symptoms.

- Step 1: Light Aerobic Activity-increase heart rate <70%, 10-20 min. biking or walking
- Step 2: Moderate Aerobic Activity-target HR <140-170 BPM, 10-30 min. jogging, bike at moderate intensity, agility drills, throwing and catching
- Step 3: Moderate Anaerobic Activity-sprints, interval bike and weight training, non-contact Sport Specific Exercises: Close to typical routine without any contact.
*Physician clearance to advance to Steps 4 and 5 is required. This clearance is in addition to any immediate care provided immediately post-concussion in the Emergency Room or physician's office.
- Step 4: Full contact practice while monitoring symptoms
- Step 5: Full uninhibited return to play
-

If an athlete is cleared by a physician to return to play on a practice or game day and has not met the Return to Play Progression or other health and safety criteria as deemed necessary by the Athletic Trainer, the athlete will not be permitted to participate.

6. Should a concussed athlete attend school?

In addition to a gradual return to play plan for athletics, athletes may also require a plan for return to the academic environment. Healing after concussion may require complete brain rest (no reading, writing, video games, computer etc.) for a period of time. Brain rest may be indicated for concussed athletes who are very symptomatic (headaches, extreme fatigue, feeling "out of it" etc.). Students often recover from concussion more quickly when they allow for complete brain rest in the period immediately following concussion. Please contact the School Nurse or School Counselor if your child has had a concussion. This is important information that should be shared with your child's school team. If your physician has recommended a period of absence or partial day attendance during concussion recovery, we will require additional written information from the health care provider. When information is provided by the parent/guardian from the health care provider, the School based team can address any necessary classroom based accommodations. For more information on return to school please see Appendix B for school specific resources.



7. What is the safety in Youth Sports Act?

The Pennsylvania Concussion Law effective July 1, 2012 for interscholastic athletics, school-sponsored cheerleading and school based club sports requires the following: 1) Educational materials for students and their parents/guardians and coaches around the risk and nature of traumatic brain injury (TBI). 2) Removal from Play for students who exhibit signs or symptoms of a concussion 3) Return to Play after concussion only upon clearance in writing by an appropriate medical professional. Appropriate Medical Professionals are defined as a) MD trained in the management and evaluation of concussions b) a licensed or certified health care professional trained in the evaluation and management of concussions and designated by the appropriate licensed physician c) a licensed psychologist who is neuropsychologically trained in the evaluation or management of concussions or has post-doctoral training in neuropsychology and specific training in the evaluation and management of concussion 4) annual training for coaches in concussion through specific PA approved providers 5) penalties for coaches who violate Remove from Play or Return to Play provisions.

8. What education do coaches have regarding concussions?

In compliance with the PA Safety in Youth Sports Act, all athletic coaches are required to complete an annual training around concussion that is approved by the Pennsylvania Department of Health. The Athletic Trainer is a resource to the coaches for concussion education.

[Appendix B-2: Sudden Cardiac Arrest Symptoms and Act 173](#)

[Appendix B-3: Assumption of Risk Contract](#)



School District Provided Accident Insurance

By decision of the Haverford Township School Board/ players are insured by the district.

The School District makes available a "Student Accident Insurance" policy. Brochures explaining this insurance are available in homerooms when school opens in September. **The District strongly recommends all students who participate in athletics elect to purchase this coverage.**

If your son/daughter tries out, practices, or participates in a fall sport before school opens and then you purchase the "Student Accident Insurance" on the first or second school day, the coverage is retroactive to the first approved practice date.

If a parent purchases School District Accident Insurance that covers an athletic related injury, it is the parent's responsibility to apply for coverage. If an accident occurs, a claim form should be obtained immediately from the high school office.

What should the parent do in the event of an injury?

1. Family insurance coverage; the parent is responsible.
2. School District provided insurance purchased by a parent.
 - a. Call the Athletic Office to make sure that a "School District of Haverford Township Accident Report" is on file. This should be done within a seven to 10-day period following the injury.
 - b. Arrange with the athlete to have the paperwork signed by the proper authorities.
 - i. Fill out portion to be completed by parent.
 - ii. Take form to doctor by the second visit for completion of his part. **DO NOT LEAVE THIS FORM WITH THE DOCTOR.**
 - iii. Attach all bills to claim and mail directly to the insurance company. Any further bills are to be collected and mailed together. **DO NOT** return bills or claim to school.
 - iv. If you have any questions concerning the policy please contact the athletic office for contact information

[Appendix B-4: Student-accident Claim form](#)



Code of Conduct and Sportsmanship

Code of Conduct

([HTSD Board Policy 123](#))

General Regulations -

1. Pennsylvania Interscholastic Activities Association rules must be followed in all cases of eligibility, transfer, physical examinations, insurance coverage, starting dates, use of school equipment, etc. Each coach/sponsor has the responsibility to know, to inform team members and parents, and to enforce school and P.I.A.A. regulations in these matters.
2. The following P.I.A.A. rules, in regard to academic achievement, will apply to all students involved in activities whether they be athletic or non-athletic.
 - a. Academic Achievement In order to be eligible for any co-curricular activity a student must pass at least two (2) full credit subjects or the equivalent. Failures are reported on a weekly basis. Students who are not passing two (2) full credit subjects or the equivalent at the end of any week will be ineligible for the following week. When a student does not pass two (2) full credit subjects or the equivalent at the end of a marking period s/he will be ineligible for a period of three (3) weeks (15 school days) in the next grading period.
 - b. At the end of the school year, the student's final grades and credits in his/her subjects, rather than his/her grades and credits for the last grading period, shall be used to determine his/her eligibility for the next grading period.
3. Any civil law infraction or conduct by a student participant that is determined by the head coach/sponsor and school administration to be detrimental to the co-curricular program, school or school district will result in counseling by the head coach/sponsor and a school administrator with possible suspension from the sport/activity and/or school.
4. Participants must travel to and from activities, away from Haverford in transportation provided by the school district or other district-approved means. The only exceptions are:
 - a. Injury to a participant which would require alternate transportation.
 - b. Prior arrangement between the participant's parent/guardian and the coach/sponsor for the student to ride with the parent/guardian.



5. A display of unsportsmanlike conduct toward an opponent, teammate, official, coach/sponsor, or use of profanity during a practice or contest will result in counseling by the head coach/sponsor and possible suspension from the program. If this type of behavior occurs more than once, a student may be suspended from the program for the remainder of the season.
6. Unexcused absences from scheduled practices and/or contests may result in:
 - a. First Offense
 - i. Warning minimum action.
 - ii. Two (2) week suspension maximum action.
 - b. Second Offense
 - i. Two (2) week suspension minimum action.
 - ii. Suspension for the season maximum action.
7. Violations of the Code of Student Behavior that result in detention or suspension, other than possession and/or use of alcohol or illegal drugs may result in:
 - a. Suspension from one (1) contest following the first violation.
 - b. Suspension from the program for the remainder of the season following the second violation.
 - i. A student who is assigned to detention after school may report to practice only after the detention period is completed.
 - ii. A student who is assigned to in-school or out-of-school suspension may not participate in any activities after school or in the evening of each day of the suspension. For suspensions that carry from the end of the week to the beginning of the following week or extend over non-school days, the student will not be permitted to participate in any activity that is scheduled for those days.
8. Theft or malicious destruction of any school or individual's equipment or property is not to be tolerated.
 - a. First Offense - The individual may be suspended from the program for five (5) school days. At the end of this period, following counseling by the head coach/sponsor and a school administrator, a decision regarding further competition will be made.
 - b. Second Offense - Suspension from the program for the remainder of the season and a referral of the student to the school administration for appropriate disciplinary action.
9. Completion of the season is required in order for the student to be eligible for a letter or other team or individual awards. (Exception, injury which limits participation.) No awards shall be given to any student suspended for the remainder of the season for a co curricular code violation.



Sportsmanship

Code of Conduct and Sportsmanship

All students shall be guided by the highest standards of integrity and honesty in the classroom, on the practice field, and in competition.

1. Students shall avoid any act tending to promote their own interests at the expense of the dignity of their school.
2. Students shall avoid any act tending to promote their own interests at the expense of the dignity of a fellow student.
3. Students shall not compete unfairly on the practice field, in competition, or in the classroom.
4. Students shall not attempt to malign, directly or indirectly, another student, coach or instructor.
5. Students shall give credit to their fellow players, coaches and sponsors when such credit is deserved.

Students, including athletes, shall dedicate their primary efforts to the goals and interests of their school, sport, activity, teammates and the public.

1. Students shall hold paramount the safety of teammates as well as their opponents.
2. Students shall abide by the rules and regulations of their coaches and sponsors, as well as P.I.A.A., Central Athletic League and Haverford High School.
3. Students athletes shall dedicate their efforts to academic progress for their own benefits as well as their team.
4. Students shall not permit the use of their names in advertising ventures with any person or firm where such act is a violation of the school or a governing association's rules and regulations.
5. In public statements or in interviews with the press, students and student athletes shall make statements in a truthful and factual way.
6. Students and student athletes shall not be influenced in their competition by conflicting personal or financial interests.

Appendix C-1: Student-Athlete Contract



Family and Coach Protocol

Parenting and coaching are both extremely difficult undertakings. As parents and coaches become more aware of each other's roles and responsibilities, all of our children benefit. When your child becomes involved in our athletic programs, you have a right to understand what expectations are placed on him/her. It is also important for parents to understand that coaches are professionals and will need to make judgment decisions on what they believe to be in the best interest of all students involved. This is facilitated by clear communication between you and your child's coaches, and the athletic department..

Research indicates that students involved in co-curricular activities have a greater chance for success in school and during adulthood. Many of the character traits developed as a successful participant are exactly those that will promote a successful life after high school. We hope the information provided here helps to make both your child's and your experience with the Haverford High School athletic program less stressful and more enjoyable.

Expectations and protocols for the parent/guardian

1. Support your student athlete's efforts toward success.
2. Work to promote a positive environment that is conducive to the development of your student athlete.
3. Become familiar with, and review the team and athletic department rules and regulations with your student-athlete.
4. Communicate any concerns in a timely manner, according to district protocol.
5. Treat all coaching personnel with courtesy and respect, and insist your student-athlete does the same.
6. Make every effort to accompany your student-athlete to informational meetings offered by the coach and/or the athletic department.
7. Ensure your student-athlete attends all scheduled practices and athletic contests.
8. Acknowledge and support the ultimate authority of the coach to determine strategy and player selection.
9. Promote and model mature and sportsmanlike behavior at all athletic contests.
10. Work closely with coaches, guidance counselors, and school personnel to identify a reasonable and realistic future for your student-athlete after high school.
11. Attend as many contests as possible to show support for your child, the team, and the school.



Expectations and protocol for coaches

1. Promote the health and safety of all student-athletes at all times. Create a safe environment.
2. Be a model of appropriate language, sportsmanship, and behavior and demand this of all team personnel.
3. Respect and dignify each student-athlete as an individual.
4. Establish time demands that acknowledge the primary importance of each student-athlete's academic and family responsibilities. Communicate these demands in a timely manner.
5. Promote among athletes and coaches a solid sense of team membership.
6. Maintain an awareness of recent thinking and strategy in their specific sport or discipline.
7. Assist, whenever appropriate and mutually convenient, with the post high school planning for individual student-athletes as it relates to athletics.
8. Be available to parents at times that are mutually convenient and in alignment with the athletic department's parent/coach communication guidelines.
9. Work with school personnel, when appropriate, to advocate for the best interest of the student-athletes.
10. Encourage student-athletes to experience high school in a well-rounded manner. Foster their interests to pursue other options in addition to your specific sport. Speaking in a derogatory fashion about other sports or activities is unprofessional and unacceptable.
11. Understand the prioritization that all in-season sports take full precedence over any voluntary workouts for sports that are out-of-season.
12. Adhere to all PIAA and School District of Haverford Township and athletic department policies at all times.

Communication you Should Expect from your Child's Coach:

1. Philosophy of the coach
2. Expectations the coach has for your child as well as all players on the team
3. Locations and times of all practices and contests.
4. Optional team requirements- special equipment, out-of-season conditioning.
5. Procedure should your child be injured during either a practice or game
6. Team rules and discipline procedures
7. Communication procedures for contacting coaches/staff
8. Criteria for making the team



Communication Coaches Expect from Families:

1. Concerns expressed directly to coach
2. Notification of any schedule conflicts well in advance
3. Specific concerns about coach's team rules and expectations
4. Absences from school due to illness
5. Medical conditions or injuries that would interfere or prevent participation (also contact Athletic trainers)

As your children participate in the athletic programs at Haverford High School, they will experience some of the most rewarding moments of their lives. They will also experience some of the most significant challenges in their lives. We believe, when scaffolded and framed correctly, these challenges (that include playing time, cuts) can be some of the most important parts of their development. At these instances, discussion with the coach is encouraged.

Appropriate Concerns to Discuss with Coaches:

1. How can we help ensure your child's physical and emotional safety?
2. Ways to help your child improve
3. Your child's attitude, work ethic, and academic eligibility.
4. Concerns about your child's behavior, mood, suspected substance abuse, or eating disorders.

It is very difficult to accept your child not playing as much as you hope. However, coaches are professionals and make judgments and decisions based on what they believe to be the best for all students involved. As you have seen from the lists above, certain things can and should be discussed with your child's coach. Other things must be left to the discretion of the coach.

Issues not Appropriate to Discuss with Coaches:

1. Other student-athletes and families.
2. Playing time
3. Team Strategy
4. Play Calling



ATHLETICS

Procedures to follow if there is a concern to discuss with a coach

1. Please encourage your child to speak directly with the coach and do not wait until the end of the season to express your concerns. It is the goal of Haverford High School to foster the development of the whole child socially and emotionally and prepare them to participate in the global community by promoting student-athlete self-advocacy in communication. We recognize and understand that all students and families are on a different page and it is our goal to help scaffold and foster this type of communication and development. ***The student-athlete self-advocacy pathway at Haverford High School is lined as follows.***

Student-Athlete Self-Advocacy Pathway



2. Call the coach directly to set up an appointment
3. If the coach cannot be reached, call the Athletic Dept. directly at (610) 853-5900 ext. 2561 and they will assist in coordinating a meeting time.
4. 24 hour rule- Please do not attempt to confront a coach before or after a practice or within 24 hours after a game. Due to the intense nature of athletics, these can be emotional times for both the parents and coaches. Meetings of this nature do not promote resolution and our coaches number one responsibility is their team at those times. If you do approach a coach within the 24 hour window, our coaches are advised to remove themselves from the situation.



Behavior at School Sponsored Activities

Student behavior problems which occur at or while traveling to/from extracurricular, school-sponsored activities, regardless of whether the activities take place on or off school property, will be acted upon as if the situation occurred during the school day. Participation in future events may be limited or prohibited and other consequences may be imposed and will be determined on a case-by-case basis.

Haverford High School Athletic Department Guidelines for Spectators

Participation as a fan is an expectation at Haverford High School and we take pride in creating a positive environment for all spectators and athletes. It is of the utmost importance that ALL members in attendance promote good behavior and sportsmanship. Our goal is to provide an atmosphere conducive to the development of good citizenship, inclusivity, positivity, and equitable opportunities for learning while maximizing the achievement of educational and extra-curricular goals.

Haverford joins the PIAA and Central League in promoting good sportsmanship by student-athletes, coaches, and spectators. We request your cooperation by supporting the participants and officials in a positive manner. Profanity, racial or sexist comments, or other intimidating actions directed at officials, student-athletes, coaches, or team representatives will not be tolerated and are grounds for immediate removal from the site of competition.



Spectator Conduct Guidelines

1. You are at a contest to support and cheer for your team to enjoy the skill and competition; not to intimidate or ridicule the other team's players, coaches, or fans.
2. Interscholastic athletics are a learning experience for students and that mistakes are sometimes made. Praise student-athletes in their attempt to improve themselves as students, athletes, and people.
3. A ticket is a privilege to observe a contest. Actions that are verbally assaulting are grounds for removal from the athletic event.
4. Show respect for the opposing players, coaches, spectators, and support groups.
5. Respect the integrity and judgment of contest officials. They are doing their best to help promote the student-athlete.
6. Recognize and show your appreciation for an outstanding play by either team.
7. Use only those cheers that support and uplift the teams involved.
8. Be a positive role model through your own actions and assist in censuring those around you whose behavior is unbecoming.
9. *Everyone deserves the right to a great game experience. This means...*
 - Players Play*
 - Coaches coach*
 - Officials officiate*
 - Fans cheer*

Prohibited Items

- Backpacks, bags, and balls are not allowed at extracurricular sporting events.
- Tobacco, electronic smoking products, alcohol, illegal or other controlled substances are expressly prohibited and law enforcement will be contacted if illegal activity is suspected.
- Attire should be appropriate and follow the HHS dress code. No disruptive costumes. No ski masks.
- Drones and pets are prohibited on campus at any time, including during sporting contests and at after school events, unless expressly approved in advance.
- Per the PIAA: The presence and/or use of balloons, banners, laser pointers, noisemakers, pom-poms (by spectators), shakers, signs, sirens, strips of material, towels, whistles, and or/portable listening devices (without earphones) are prohibited.

Guidelines for Seating- Students need to be seated in the designated student area. Student seating is always on our bench side- either behind or directly across from the team.

Theme Nights- Theme nights give our school the opportunity to come together in spirit to support our sports teams. Theme nights (red outs, etc0) will be permitted as long as the theme is appropriate for the specific game and has been approved by administration.







Uniform and Equipment Protocols

Athletic Director Responsibilities

1. Ensure the update of uniforms in a cycle that promotes the values of Haverford Athletics and Title IX procedures.
2. Ensure equipment is safe and up to date/protocol according to NFHS guidelines.
3. Storage and facilitation of uniforms.

Coaches Responsibility

1. Inventory the uniforms and equipment.
2. Collect and return the uniforms in a timely manner.
3. Communicate guidelines for students and families to maintain uniform cleanliness.
4. Report any uniform malfunctions or damage as soon as possible.
5. Distributing "student obligation forms" for students who do not return uniforms.

Student-Athlete Responsibility

1. Maintain the cleanliness and order of uniform.
2. Return the uniform in a timely manner and at the coaches request.
3. Student-Athletes who do not return their uniforms can be ineligible to graduate or participate in extracurricular or co-curricular activities until a student obligation form has been paid and processed.
4. It is the responsibility of each student/athlete to return any and all uniforms and equipment at the end of the season. If student-athletes fail to do so appropriate disciplinary action will be taken.
 - a. A grade level obligation will be placed in the student's name for the dollar value of the unreturned equipment. Report cards will be held until all obligations assigned to a student are cleared with their grade level office.



Rules and Regulations for Student ATHLETICS

Introduction

A student athlete is a representative of the Haverford High School community. As a member of this community, each student has a responsibility to understand and live by the established rules of behavior. Participation in High School athletics is an earned opportunity and a special privilege. Violations of policies and regulations may severely restrict a student's participation in athletic competition.

In addition to the P.I.A.A. rules and eligibility requirements, students are expected to read and comply with all other established rules and behavioral expectations. These include team rules, specific high school rules and regulations as determined by the administration, and Haverford School District Policies.

We invite you to visit PIAA.org to review their information.

Team Rules

Establishing team rules and regulations for each sport is the responsibility of the head coach. For example, each coach will articulate expectations regarding team practice and game conduct. Uniform dress code, equipment care, and absence policy are some of the additional areas where individual coaches determine specific rules. It is the student's responsibility to review and acknowledge team rules before joining the team.



Hazing, Bullying, and Harassment ([HTSD Board Policy 247](#), [248](#) and [249](#))

Purpose: The board strives to provide a safe, positive learning environment for students and staff that is free from hazing, bullying, and harassment. The Board recognizes that bullying creates an atmosphere of fear and intimidation, detracts from the safe environment necessary for student learning, and may lead to more serious violence. Hazing activities are inconsistent with the educational goals of the district and therefore, the Board prohibits by and of district students and staff at all times.

Definitions

Hazing: occurs when a person intentionally, knowingly or recklessly, for the purpose of initiating, admitting or affiliating a student with an organization, or for the purpose of continuing or enhancing membership or status in an organization, causes, coerces or forces a student to do any of the following:

1. Violate federal or state criminal law.
2. Consume any food, liquid, alcoholic liquid, drug or other substance which subjects the student to a risk of emotional or physical harm.
3. Endure brutality of a physical nature, including whipping, beating, branding, calisthenics or exposure to the elements.
4. Endure brutality of a mental nature, including activity adversely affecting the mental health or dignity of the individual, sleep deprivation, exclusion from social contact or conduct that could result in extreme embarrassment.
5. Endure brutality of a sexual nature.
6. Endure any other activity that creates a reasonable likelihood of bodily injury to the student.

Bullying: shall include cyberbullying and means intentional electronic, written, verbal or physical acts, directed at another student or students, which meets all of the following criteria.

1. Occurs in a school setting
2. Is severe, persistent or pervasive, and
3. Has the effect of:
 - a. Substantially interfering with a student's education;
 - b. Creating a threatening environment; or
 - c. Substantially disrupting the orderly operation of the school.

Definitions (*continued*)



Harassment: means verbal, written, or electronic, graphic or physical conduct relating to an individual's actual or perceived race, color, age, creed, religion, sex, gender, sexual orientation, gender identity, gender expression, ancestry, national origin/ethnicity, veteran status, marital status, disability, or membership in any other protected class when such conduct:

1. Is sufficiently severe, persistent, or pervasive that it affects a student's educational performance or creates an intimidating, threatening, or abusive school environment; and/or
2. Has the purpose or effect of unreasonably interfering with student's educational performance; and/or
3. Adversely affects a student's educational opportunities. Harassment includes but is not limited to, slurs, jokes, bullying, hazing, or other verbal, written, electronic, graphic or physical conduct relating to an individual's actual or perceived race, color, age, creed, sex, gender, sexual orientation, gender identity, gender expression, ancestry, national origin/ethnicity, veteran status, marital status, handicap/disability, or membership in any other protected class. Harassment also includes, sexual harassment.

School setting: means in school, including in a virtual setting; on school grounds; in school vehicles; at designated bus stops; at activities sponsored, supervised, or sanctioned by the district; or in any other circumstances or location (on or away from school property) where the district has jurisdiction over a student's conduct.

Hazing/ Bullying is not an accepted practice by the Haverford School District and cannot be tolerated or condoned in the athletic program.

[**Appendix D-1: Pennsylvania Hazing Law**](#)

[**Appendix D-2: Additional Hazing Resources**](#)

[**Appendix D-3: Bullying, Harassment, Hazing, Discrimination Complaint Form**](#)



Social Media

[\(HTSD Board Policy 249\)](#)

Any student posting things via a social media outlet must adhere to School Board Policy 249, the Athletic Code of Conduct in addition to any school rules that may apply. It is imperative that any social media correspondence fall under the guidelines of sportsmanship and fair play. Please use good judgment when posting anything on one of these outlets. Those found in violation of the above may jeopardize participation in and/or attendance of an extracurricular event.

Use or Possession of Alcoholic Beverages/Illegal Drugs

[\(HTSD Board Policy 123\)](#)

Use or possession of alcoholic beverages, or illegal drugs by co-curricular participants is strictly prohibited. Separate and apart from the consequences for such behavior under the Student Discipline Code, students may be excluded from participation in co-curricular and/or interscholastic activities for forty-five (45) to one hundred-eighty (180) days, in addition to referral to the SAP for appropriate assessment.

Before any suspension, provided under these rules shall take effect, the student shall be verbally advised of the alleged violation by the head coach/sponsor and the student will have an opportunity to explain.

1. The coach/sponsor will then make a recommendation, if any, to the appropriate administrator.
2. The appropriate administrator will then notify the student of the penalty after consultation with the head coach/sponsor.
3. The student may request a meeting with the building principal for purposes of reviewing the circumstances and the penalty. The student's parents shall be notified of such a meeting and will be permitted to attend.
4. The decision of the building principal shall be final.

The rules and regulations in this Code shall apply to any violations, on and off school premises, during the season of participation where the violations can be determined.

Additional rules or regulations from the head coach/sponsor must be cleared by the administrator in charge. Any additional rules and regulations must be in writing and on file in the appropriate office.

In order to fully implement this policy, the Haverford Township School District will communicate and cooperate with the community agencies and outside resources.



Post-Secondary Athletics

College-Bound Student-Athletes and Recruiting

Haverford High School recognizes a number of our student-athletes participate in interscholastic athletics with a goal of playing at the post-secondary level. While our mission is to educate our student-athletes, we understand that part of our responsibility is in helping to facilitate their transition to collegiate athletics. Recruiting is not a primary function of our athletic department or coaching staff but they are able to assist our student-athletes and families in the qualifications befitting of an NCAA student-athlete, appropriate goal setting athletically and academically, and in communicating with colleges and college coaches on their behalf.

Haverford High School NCAA Counselor

Lauren Pellicane

LPellicane@haverfordsd.net

NCAA Registration and Student Resources

Athletes interested in participating in NCAA sports should register at eligibilitycenter.org.

[NCAA Guide for the College-Bound Student-Athlete 2023-24](#)

Student Responsibilities

- Register with the NCAA Clearinghouse
- Complete, Sign, and Submit the Student-Release form.
- Ensure that all of your high school transcripts are sent to the Clearinghouse (include all high school you may have attended) and most important, your final high school transcript showing proof of graduation (Please see your Counselor before the close of the school year).
- Once all of your materials have been submitted to the Clearinghouse the NCAA will determine whether you are eligible to compete at NCAA schools. The Clearinghouse will send you a written notice of your status.



NIL- Name, Image, and Likeness In

As you may be aware, on December 7, 2022, the Pennsylvania Interscholastic Athletic Association (PIAA) passed a Name, Image and Likeness (NIL) amendment to its bylaws, Article II, Section 3(J), which permits your child/you to receive consideration for the use of your child's/your name, image and likeness, and more specifically, the value that your child/you may bring to a particular business, service, activity, etc.

While this amendment provides new opportunities for your child/you, it also places specific prohibitions on the type of NIL engagements that your child/you may agree to, and failure to comply with the requirements below could result in your child's/your forfeiture of amateur status, and thereby, the ability to compete in interscholastic events on behalf of the School District of Haverford Township. Below is a list of NIL parameters that have been established by the PIAA:

- Your child's/Your acceptance of consideration (both monetary and "in-kind," which includes, but is not limited to, free or discounted equipment, clothing, or training sessions, etc.) may **not** be contingent on enrollment in or transfer to a particular PIAA school;
- When engaging in NIL appearances, social media posts, advertisements and the like, your child/you may **not** wear clothing or items referencing the: PIAA, PIAA District I, Central Athletic League, School District of Haverford Township or any District schools, your child's/your team name, team nickname, team uniforms or related clothing, team or school logos, or terms which your child's/your team name is commonly referred to (for example, filming an NIL advertisement while wearing a sweatshirt that says "Fords Athletics" or endorsing an NIL partner on your child's/your social media page that also identifies your child's/your status as a Haverford, Central League or PIAA student or athlete);
- Your child/You may **not** make NIL promotions or endorsements during team/school activities;
- Your child/you may **not** wear apparel or display a logo, insignia or identifying mark of an NIL partner during school/team athletic activities **unless** it is part of the standard school uniform for that sport (i.e., use of bats, sticks, gloves, clubs, etc., that your child/you receive(s) NIL endorsements for is generally permissible; however your child/you may not advertise the NIL endorsement during pre or post-game interviews and/or media coverage);



- Your child/you may **not** engage in activities involving, displaying, or endorsing the following categories of products and services:

- (1) Adult entertainment products and services;
- (2) Alcohol products;
- (3) Casinos and gambling, including sports betting, the lottery, and betting in connection with video games, on-line games and mobile devices;
- (4) Tobacco and electronic smoking products and devices;
- (5) Opioids and prescription pharmaceuticals;
- (6) Controlled dangerous substances;
- (7) Weapons, firearms and ammunition.

- Your child/you **must** provide a copy of any NIL agreement to your child's/your school's athletic director within seventy-two (72) hours of signing so the terms can be reviewed for compliance.

Alternative: Students ***must*** provide a copy of any NIL agreement to their school's athletic director prior to signing so the terms can be reviewed for compliance.

If the agreement is not reduced to a written form, then your child/you must contact Greg Decina (Athletic Director) and provide all of the terms of the agreement within the timeframe described above.

School District of Haverford Township employees, staff members, coaches, booster clubs, collectives, administrators, alumni and affiliates are prohibited from soliciting, arranging, negotiating, or paying for a student's (other than their own child's) NIL engagements, and therefore, in an effort to maintain each one of our student-athletes' eligibilities, District employees will not be able to counsel your child/you with regard to any NIL opportunities that they/you may have.

The District will provide updates regarding NIL requirements and any changes in NIL regulations as this information becomes available from the PIAA. Please direct any questions or concerns to Greg Decina at GDecina@haverfordsd.net.



Haverford High School Athlete Signing Days

Senior athletes at Haverford High School will have the opportunity to participate in a ceremonial signing day where they can take a “signing day” picture with their family and friends to celebrate their post-secondary commitments to pursue athletics. Every year, we have roughly 35 senior student-athletes sign with a College. Some sign in the year prior and many sign in May of their graduating year. In an effort to honor and celebrate all student-athletes who commit to play their sport in college, we offer three separate signing days. The signing day events will take place in the Haverford High School library at three different times throughout the school year to accommodate athletes who commit early and late to their respective schools.

The following dates are subject to change and will be rescheduled in the event of inclement weather.

Fall - Thursday, November 16 @ 8a

Winter- Thursday, February 8 @ 8a

Spring- Thursday, May 16 @ 8a

Haverford High School Athletic Scholarships and Awards Ceremony

Athletic scholarships and awards are given to deserving seniors at the Haverford High School Awards night. The qualifications for the awards are determined by the following...

- Eligibility and good standing of student-athlete
- Specific criteria of scholarship and award
- Coach and counselor meeting



Booster Programs

Parent Booster Clubs are organizations that act as separate entity's from Haverford High School and the School District of Haverford Township which are established to support the Haverford High School sports teams. They are not mandatory for student participation. The Haverford Athletic Department is responsible for providing equipment that is mandatory to participate in field of play (uniforms, general equipment). Booster Clubs provide fund raising for banquets and team related community events. Any dues or required contributions are independent of the District and not a requirement with regard to student participation. Booster Clubs should have by-laws that are the governing rules of their organization. The District will at the end of the season request an accounting of the Booster Clubs Funds for required disclosure.

Booster Club communication

Booster clubs should communicate with the athletic department via the head varsity coach. Each booster program should share their booster president contact information at the start of each season including email and cell phone. One representative of each booster club should attend the preseason Booster meeting for policies and protocols.

Booster Club Facility Use

(In compliance with [HTSD Board Policy 707](#))

Boosters will have access to the snack bars at the request of the athletic director and the availability of facilities to safely and appropriately monitor their use. The Athletic director will be responsible for ensuring access. Booster clubs are responsible for communicating with one another to ensure appropriate use, sharing of space, resources, and cleanliness.

Booster Club Finances and Fundraising

(In compliance with [HTSD Board Policy 618](#))

Booster clubs are allowed to fundraise as a separate entity from the School District of Haverford Township. Booster fundraising and expenditures are subject to review by the Haverford High School athletic department for Title IX compliance and reporting. Any display of fundraising partners should clearly state their relationship to the Booster program and not the High School sports team affiliate. Haverford High School does not promote gambling.




Appendix and Additional Resources

Appendix A-1 Eligibility for Interscholastic Athletics

1. School District of Haverford Township Board Policy 123

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Book	Policy Manual
Section	100 Programs
Title	Interscholastic Athletics/Co-Curricular Activities
Code	123
Status	Active
Adopted	November 1, 1991
Last Revised	February 4, 1999

Purpose

The Board recognizes the value of a program of interscholastic athletics as an integral part of the total school experience to all students of the district and to the community.[1]

Definition

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

Authority

It shall be the policy of the Board to offer opportunities for participation in interschool athletic programs to male and female students on an as equal basis, as is practicable and in accordance with State regulations.[2]

The Board shall approve annually a program of interscholastic athletics and shall 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.

Guidelines

Eligibility Requirements

Students who participate in any interscholastic activity must conform to the eligibility rules of the Pennsylvania Interscholastic Athletic Association (PIAA). Some of the most important rules are as follows:

1. Age - No student may participate in any contest who attains the age of nineteen (19) on or after the date set for the beginning of a particular sport season, but a student who attains the age of nineteen (19) on or after the date set forth beginning of a particular sport season may continue to participate in that sport for the season.
2. Amateur - A student must be an amateur in order to participate.

<https://go.boarddocs.com/pa/have/Board.nsf/Public#>

1/5

Revised: September 2023

BoardDocs® Pro

3. Transfer - Special rules applying to students who transfer from one school to another (other than from the junior high school to senior high school) restrict participation.



- a period of three (3) weeks (15 school days) in the next grading period.
- b. At the end of the school year, the student's final grades and credits in his/her subjects, rather than his/her grades and credits for the last grading period, shall be used to determine his/her eligibility for the next grading period.
2. Any civil law infraction or conduct by a student participant that is determined by the head coach/sponsor and school administration to be detrimental to the co-curricular program, school or school district will result in counseling by the head coach/sponsor and a school administrator with possible suspension from the sport/activity and/or school.
3. Participants must travel to and from activities, away from Haverford in transportation provided by the school district or other district-approved means. The only exceptions are:
- a. Injury to a participant which would require alternate transportation.
- b. Prior arrangement between the participant's parent/guardian and the coach/sponsor for the student to ride with the parent/guardian.
4. A display of unsportsmanlike conduct toward an opponent, teammate, official, coach/sponsor, or use of profanity during a practice or contest will result in counseling by the head coach/sponsor and possible suspension from the program. If this type of behavior occurs more than once, a student may be suspended from the program for the remainder of the season.
5. Unexcused absences from scheduled practices and/or contests may result in:
- a. First Offense
- i. Warning minimum action.
- ii. Two (2) week suspension maximum action.
- b. Second Offense
- i. Two (2) week suspension minimum action.
- ii. Suspension for the season maximum action.
6. Violations of the Code of Student Behavior that result in detention or suspension, other than possession and/or use of alcohol or illegal drugs may result in:
- a. Suspension from one (1) contest following the first violation.
- b. Suspension from the program for the remainder of the season following the second violation.
- i. A student who is assigned to detention after school may report to practice only after the detention period is completed.
- ii. A student who is assigned to in-school or out-of-school suspension may not participate in any activities after school or in the evening of each day of the suspension. For suspensions that carry from the end of the week to the beginning of the following week or extend over non-school days, the student will not be permitted to participate in any activity that is scheduled for those days.
7. Theft or malicious destruction of any school or individual's equipment or property is not to be tolerated.



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- a. First Offense - The individual may be suspended from the program for five (5) school days. At the end of this period, following counseling by the head coach/sponsor and a school administrator, a decision regarding further competition will be made.
- b. Second Offense - Suspension from the program for the remainder of the season and a referral of the student to the school administration for appropriate disciplinary action.

8. Completion of the season is required in order for the student to be eligible for a letter or other team or individual awards. (Exception, injury which limits participation.) No awards shall be given to any student suspended for the remainder of the season for a cocurricular code violation.

School Attendance Requirements

1. A student must be in school for 1/2 day in order to participate in an activity that day. (Student must be in school by 11:15 a.m. or leave after 11:15 a.m. in order to meet the 1/2 day requirement.) Exceptions will be made if the student has an approved medical or educational appointment. In such case, the student must present to the attendance office a signed statement from the doctor regarding the absence. For college visitations, a note from a parent or guardian would be necessary.
2. If a student is absent on a day prior to a nonschool day(s), and the competition is on a nonschool day, the student must bring the coach/sponsor a signed statement from the parent/guardian explaining the reason for the absence. It is recommended that the coach/sponsor call the parent/guardian regarding the absence.
3. A student who has been injured and has had medical treatment cannot participate again until the date indicated by the student's doctor.

Use or Possession of Alcoholic Beverages/Illegal Drugs

Use or possession of alcoholic beverages, or illegal drugs by co-curricular participants is strictly prohibited. Separate and apart from the consequences for such behavior under the Student Discipline Code, students may be excluded from participation in co-curricular and/or interscholastic activities for forty-five (45) to one hundred-eighty (180) days, in addition to referral to the H.E.A.R.T. team for appropriate assessment.

Before any suspension, provided under these rules shall take effect, the student shall be verbally advised of the alleged violation by the head coach/sponsor and the student will have an opportunity to explain.

1. The coach/sponsor will then make a recommendation, if any, to the appropriate administrator.
2. The appropriate administrator will then notify the student of the penalty after consultation with the head coach/sponsor.
3. The student may request a meeting with the building principal for purposes of reviewing the circumstances and the penalty. The student's parents shall be notified of such a meeting and will be permitted to attend.
4. The decision of the building principal shall be final.

The rules and regulations in this Code shall apply to any violations, on and off school premises, during the season of participation where the violations can be determined.

Additional rules or regulations from the head coach/sponsor must be cleared by the administrator in charge. Any additional rules and regulations must be in writing and on file in the appropriate office.

Legal

[1. 24 P.S. 511](#)

2. 22 PA Code 5.217



2. Dual-Sport/Activity Participation Contract

Greg Decina
Athletic Director



Michelle Romano
Athletic Secretary

Extracurricular Sport/Activity Participation Contract

Student: _____ Grade: 9 10 11 12

Primary Sport/Activity: _____ Coach/Advisor: _____

Secondary Sport/Activity: _____ Coach/Advisor: _____

Other Sport/Activity: _____ Coach/Advisor: _____

Practice Arrangement (Must complete):

Competition Arrangement (Must complete):



We understand that we are committing to each sport/activity by the following terms listed above. As a dual sport/activity participant, I understand the importance of making a commitment to the betterment of both programs, scheduling between practices and competitions, and communicating with both coaching staff, advisor, and administration. I will participate in my secondary sport/activity when agreed to and signed by both coach and advisor. In case of an unforeseen conflict, the coach and/or advisor involved will be the determining factor in regards to deciding where the student-athlete will attend. In such a case where the coaches and/or advisor cannot come to an agreement, the athletic director and/or principal will make the final decision.

_____ <i>Signature of Primary Coach/Advisor</i>	_____ <i>Date</i>
_____ <i>Signature of Secondary Coach/Advisor</i>	_____ <i>Date</i>
_____ <i>Signature of Student-Athlete</i>	_____ <i>Date</i>
_____ <i>Signature of Parent/Guardian</i>	_____ <i>Date</i>
_____ <i>Signature of Athletic Director/Principal</i>	_____ <i>Date</i>



Appendix B- Health and Safety

1, PIAA CIPPE- Physical Examination for Student-Athletes

	PIAA COMPREHENSIVE INITIAL PRE-PARTICIPATION PHYSICAL EVALUATION	
<p>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.</p> <p>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.</p>		
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 # () _____		
Parent/Guardian E-mail Address: _____		
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: September 2023

Revised: March 22, 2023 BOD approved



SECTION 2: CERTIFICATION OF PARENT/GUARDIAN

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 7 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 SYMPTOMS AND WARNING SIGNS

What is sudden cardiac arrest?

Sudden cardiac arrest (SCA) occurs when the heart suddenly and unexpectedly stops beating. 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 athletes 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;
- Shortness of breath or difficulty breathing with exercise, that is 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 results off 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 significant risks associated with continuing to practice or play after experiencing these symptoms. The symptoms might mean something is wrong and the athlete 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 help keep student-athletes safe while practicing or playing by providing education about SCA and by requiring notification to parents that you can request, at your expense, an electrocardiogram (EKG or ECG) as part of the physical examination 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 or for a variety of symptoms such as chest pain, palpitations, dizziness, fainting, or family history of heart disease.

- 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 should 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 (false positive findings occur less 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 simply using the current history and physical exam.

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 (which includes all athletic activity). The symptoms can happen before, during, or after activity.

Before returning to play, the athlete must be evaluated and cleared. 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.

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

PA Department of Health/CDC: Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet Acknowledgement of Receipt and Review Form. 7/2012 PIAA Revised October 28, 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.

	Yes	No		Yes	No
1. Has a doctor ever denied or restricted your participation in sport(s) for any reason?	<input type="checkbox"/>	<input type="checkbox"/>	23. Has a doctor ever told you that you have asthma or allergies?	<input type="checkbox"/>	<input type="checkbox"/>
2. Do you have an ongoing medical condition (like asthma or diabetes)?	<input type="checkbox"/>	<input type="checkbox"/>	24. Do you cough, wheeze, or have difficulty breathing DURING or AFTER exercise?	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you currently taking any prescription or nonprescription (over-the-counter) medicines or pills?	<input type="checkbox"/>	<input type="checkbox"/>	25. Is there anyone in your family who has asthma?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you have allergies to medicines, pollens, foods, or stinging insects?	<input type="checkbox"/>	<input type="checkbox"/>	26. Have you ever used an inhaler or taken asthma medicine?	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you ever passed out or nearly passed out DURING exercise?	<input type="checkbox"/>	<input type="checkbox"/>	27. Were you born without or are you missing a kidney, an eye, a testicle, or any other organ?	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you ever passed out or nearly passed out AFTER exercise?	<input type="checkbox"/>	<input type="checkbox"/>	28. Have you had infectious mononucleosis (mono) within the last month?	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you ever had discomfort, pain, or pressure in your chest during exercise?	<input type="checkbox"/>	<input type="checkbox"/>	29. Do you have any rashes, pressure sores, or other skin problems?	<input type="checkbox"/>	<input type="checkbox"/>
8. Does your heart race or skip beats during exercise?	<input type="checkbox"/>	<input type="checkbox"/>	30. Have you ever had a herpes skin infection?	<input type="checkbox"/>	<input type="checkbox"/>
9. Has a doctor ever told you that you have (check all that apply):			CONCUSSION OR TRAUMATIC BRAIN INJURY		
<input type="checkbox"/> High blood pressure	<input type="checkbox"/>	<input type="checkbox"/>	31. Have you ever had a concussion (i.e. bell rung, ding, head rush) or traumatic brain injury?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Heart murmur	<input type="checkbox"/>	<input type="checkbox"/>	32. Have you been hit in the head and been confused or lost your memory?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> High cholesterol	<input type="checkbox"/>	<input type="checkbox"/>	33. Do you experience dizziness and/or headaches with exercise?	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Heart infection	<input type="checkbox"/>	<input type="checkbox"/>	34. Have you ever had a seizure?	<input type="checkbox"/>	<input type="checkbox"/>
10. Has a doctor ever ordered a test for your heart? (for example ECG, echocardiogram)	<input type="checkbox"/>	<input type="checkbox"/>	35. Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling?	<input type="checkbox"/>	<input type="checkbox"/>
11. Has anyone in your family died for no apparent reason?	<input type="checkbox"/>	<input type="checkbox"/>	36. Have you ever been unable to move your arms or legs after being hit or falling?	<input type="checkbox"/>	<input type="checkbox"/>
12. Does anyone in your family have a heart problem?	<input type="checkbox"/>	<input type="checkbox"/>	37. When exercising in the heat, do you have severe muscle cramps or become ill?	<input type="checkbox"/>	<input type="checkbox"/>
13. Has any family member or relative been disabled from heart disease or died of heart problems or sudden death before age 50?	<input type="checkbox"/>	<input type="checkbox"/>	38. Has a doctor told you that you or someone in your family has sickle cell trait or sickle cell disease?	<input type="checkbox"/>	<input type="checkbox"/>
14. Does anyone in your family have Marfan Syndrome?	<input type="checkbox"/>	<input type="checkbox"/>	39. Have you had any problems with your eyes or vision?	<input type="checkbox"/>	<input type="checkbox"/>
15. Have you ever spent the night in a hospital?	<input type="checkbox"/>	<input type="checkbox"/>	40. Do you wear glasses or contact lenses?	<input type="checkbox"/>	<input type="checkbox"/>
16. Have you ever had surgery?	<input type="checkbox"/>	<input type="checkbox"/>	41. Do you wear protective eyewear, such as goggles or a face shield?	<input type="checkbox"/>	<input type="checkbox"/>
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:	<input type="checkbox"/>	<input type="checkbox"/>	42. Are you unhappy with your weight?	<input type="checkbox"/>	<input type="checkbox"/>
18. Have you had any broken or fractured bones or dislocated joints? If yes, circle below:	<input type="checkbox"/>	<input type="checkbox"/>	43. Are you trying to gain or lose weight?	<input type="checkbox"/>	<input type="checkbox"/>
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:	<input type="checkbox"/>	<input type="checkbox"/>	44. Has anyone recommended you change your weight or eating habits?	<input type="checkbox"/>	<input type="checkbox"/>
			45. Do you limit or carefully control what you eat?	<input type="checkbox"/>	<input type="checkbox"/>
Head Neck Shoulder Upper arm Elbow Forearm Hand/ Fingers Chest			46. Do you have any concerns that you would like to discuss with a doctor?	<input type="checkbox"/>	<input type="checkbox"/>
Upper back Lower back Hip Thigh Knee Calf/shin Foot/ Toes			MENSTRUAL QUESTIONS- IF APPLICABLE	<input type="checkbox"/>	<input type="checkbox"/>
20. Have you ever had a stress fracture?	<input type="checkbox"/>	<input type="checkbox"/>	47. Have you ever had a menstrual period?	<input type="checkbox"/>	<input type="checkbox"/>
21. Have you been told that you have or have you had an x-ray for atlantoaxial (neck) instability?	<input type="checkbox"/>	<input type="checkbox"/>	48. How old were you when you had your first menstrual period?		
22. Do you regularly use a brace or assistive device?	<input type="checkbox"/>	<input type="checkbox"/>	49. How many periods have you had in the last 12 months?		
			50. When was your last menstrual period?		

#'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 _____

Parent/Guardian E-mail Address: _____

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 # () _____

If any SUPPLEMENTAL HEALTH HISTORY questions below 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.

Explain "Yes" answers at the bottom of this form.

Circle questions you don't know the answers to.

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Since completion of the CIPPE, have you sustained a serious illness and/or serious injury that required medical treatment from a licensed physician of medicine or osteopathic medicine? | <input type="checkbox"/> | <input type="checkbox"/> |

An additional note to item #1, if serious illness or serious injury was marked "Yes", please provide additional information below

- | | | |
|--|--------------------------|--------------------------|
| 2. Since completion of the CIPPE, have you had a concussion (i.e. bell rung, ding, head rush) or traumatic brain injury? | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|

- | | Yes | No |
|--|--------------------------|--------------------------|
| 3. Since completion of the CIPPE, have you experienced dizzy spells, blackouts, and/or unconsciousness? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Since completion of the CIPPE, have you experienced any episodes of unexplained shortness of breath, wheezing, and/or chest pain? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Since completion of the CIPPE, are you taking any NEW prescription medicines or pills? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Do you have any concerns that you would like to discuss with a physician? | <input type="checkbox"/> | <input type="checkbox"/> |

#s	Explain yes answers; include injury, type of treatment & the name of the medical professional seen by student

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 5 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.



2. PA Department of Health Athlete/Parent/Guardian Sudden Cardiac Arrest Information and Receipt/Review Acknowledgement



ATHLETE/PARENT/GUARDIAN SUDDEN CARDIAC ARREST INFORMATION AND RECEIPT/REVIEW ACKNOWLEDGEMENT

Sudden cardiac arrest takes the lives of thousands of children every year and is the number one killer of student athletes. A student who passes out during or right after exercise, could have an undiagnosed, and potentially- fatal, heart condition. Let's learn more about protecting our children's hearts.

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 and the person collapses. This is not the same thing as a heart attack.

Are there warning signs?

Yes, but not everyone experiences them.

- Fainting or seizures during or immediately after exercise.
- A racing heart – may feel like your heart is beating out of your chest.
- Chest pains
- Dizziness
- Shortness of breath
- Extreme fatigue

What Can We Do About It?

Understand the symptoms. Many of these symptoms are present when a student athlete is practicing or playing hard. So, pay attention to the timing. For instance, a racing heart on the sidelines, or fatigue in class or at home is concerning. Passing out is ALWAYS a concern.

Be prepared. Cardiac arrest can only be treated with CPR and an AED. Most people will die if they do not receive this help within a few minutes. Coaches and players should know how to perform chest compressions. An automated external defibrillator (AED) should be available at practices and games (within three minutes to be exact).

Get screened. The current standard of care for assessing the risk of sudden cardiac arrest in student athletes was established by the American Heart Association. It includes (a) family history, (b) medical history, and (c) physical exam. Some studies show that adding an electrocardiogram (ECG/EKG) increases the detection of underlying heart conditions. However, more research will need to be done before the medical community agrees to change the standard.

In the interim, speak to your doctor about an ECG/EKG for your child. You will likely pay out of pocket for this test unless symptoms are present. Additionally, the ECG/EKG interpretation should be conducted by a physician familiar with the screening protocol – special guidelines developed to assess the heart of a student athlete. This will reduce the false positive rate and the ordering of additional tests for normal variations.

Requirements of this law. Act 73 seeks to raise awareness. Parents must read and sign this form acknowledging the risks and warning signs. Coaches must complete sudden cardiac arrest training annually. If a student exhibits any of the symptoms above, the student athlete must be removed from play and cleared by a licensed medical professional before returning to play.

I have reviewed this form and understand the risk of sudden cardiac arrest facing my child and steps that can be taken to achieve a positive outcome.

Signature of Student-Athlete

Print Student-Athlete's Name

Date

Signature of Parent/Guardian

Print Parent/Guardian Name

Date



3. Assumption of Risk



The School District of Haverford Township
Haverford High School
200 Mill Road
Havertown, PA 19083

Assumption of Risk

Participation in the contact sport of _____ requires an acceptance of risk of injury. _____ has taken reasonable precautions to minimize the risk of significant injury by providing coaching and instruction, suitable equipment and facilities, proper conditioning and appropriate medical care.

The chances of an athlete sustaining a catastrophic sports injury are rare. However serious injuries could occur. Participation in contact sports could result in death, serious neck, and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the musculoskeletal system, serious injury to virtually all internal organs, and serious injury or impairment to all other aspects of the body, general health and well-being.

The use of protective equipment may be required or recommended for your child's sport. Please be advised that there is no piece of protective equipment that will completely protect your child from exposure to injuries. Do not use defective equipment in any way.

Therefore, student-athletes should feel free at any time to discuss with coaching or athletic training staff concerns about procedures in the athlete's particular sport that may include a greater risk of injury such as, head first slide, tackling techniques, difficult dives, etc. Reporting of student-athlete brain injuries to the Athletic Trainer and Athletic Directory is mandatory for coaches, players and parents.

I have read and understand the statements contained in this warning. As the parent of the student-athlete, I accept risk of injury associated with interscholastic sports.

Parent Signature _____

Date _____



4. School District Provided Accident Insurance Claim Form



P.O. Box 979
Valley Forge, PA 19482
610.933.0800
Fax: 610.935.2860
www.agadministrators.com

Student Accident Claim Form

Please complete and submit to A-G Administrators with itemized medical bills and primary insurance explanation of benefits. For questions, please contact A-G Administrators.

Policyholder (School) _____

Student's Name _____
FIRST NAME MIDDLE INITIAL LAST NAME

Date of Birth _____ Sex ☐ M ☐ F SOCIAL SECURITY # _____

Cell Phone _____ Email Address _____

School Address _____
STREET CITY STATE ZIP

Home Address _____
STREET CITY STATE ZIP

ACCIDENT INFORMATION

Activity _____ Accident Date _____

Body Part Injured _____ Place of Accident _____

Nature of Injury — Details of What Happened _____

AUTHORIZED POLICYHOLDER REP. SIGNATURE _____ Title _____ Date _____

INSURANCE INFORMATION

Does the claimant have primary insurance? ☐ Yes ☐ No (Attach separate sheet if necessary.)

Insurance Company Name & Address _____

Policy Number _____ ID# _____

AUTHORIZATION

AFFIDAVIT: I verify that the statement on other insurance is accurate and complete. I understand that the intentional furnishing of incorrect information via the U.S. Mail may be fraudulent and violate federal laws as well as state laws. I agree that if it is determined at a later date that there are other insurance benefits collectible on this claim I will reimburse A-G Administrators to the extent for which A-G Administrators would not have been liable.

AUTHORIZATION TO RELEASE INFORMATION: I authorize any Health Care Provider, Doctor, Medical Professional, Medical Facility, Insurance Company, Person or Organization to release any information regarding medical, dental, mental, alcohol or drug abuse history, treatment or benefits payable, including disability or employment related information concerning the patient, to A-G Administrators and its designees.

PAYMENT AUTHORIZATION: I authorize all current and future medical benefits, for services rendered and billed as a result of this claim, to be made payable to the physicians and providers indicated on the invoices.

STUDENT SIGNATURE (Parent or guardian, if participant is a minor) _____ Date _____



FRAUD WARNING: Any person who, knowingly and with intent to defraud, or helps commit a fraud against, any insurance company or other person: (1) files an application for insurance or statement of claim containing any materially false information; or (2) conceals for the purpose of misleading, information concerning any material fact thereto, commits or may be committing a fraudulent insurance act, which is a crime and subjects such person to criminal and/or civil penalties. For residents of the following states, please see below: California, Colorado, District of Columbia, Florida, New York, Tennessee, Texas or Virginia.

California & Texas Residents: Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Colorado Residents: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies.

District of Columbia Residents: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Florida Residents: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

New York Residents: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Tennessee Residents: It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.

Virginia Residents: Any person who, with the intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement may have violated state law.



5. Emergency Action Plan

Emergency Action Plan

Jeunger Gymnasium



Emergency Personnel

Athletic Director- Greg Decina | 484-433-2295

HHS Principal- Pete Donaghy | 610-637-4334

Athletic Trainers- Brendan Boas | 267-240-7556 & David Andreozzi | 267-303-9349

Bryn Mawr Hospital | 484-337-3000

Role of First Responders

1. Immediate care of the injured or ill student-athlete
2. Activation of emergency medical services (EMS)
 - a. Call 911 (provide name, address, telephone number, number of individuals injured), condition of injured, first aid treatment, specific directions, and other information as requested.
3. Emergency equipment retrieval
4. Direct EMS to scene(if not on site) → Designate individual to open gate and direct EMS

AED Locations

6. **Back Gym Lobby** – AED is outside the Athletic Training Room on the left side in the center of the back wall.
7. **Nurses Office** - The nurse's office is located on the first floor of Haverford High school and the AED is located outside the room.
8. **Traveling AED's** – The Athletic Trainer's at HHS have two working AED's that are mobile. They will be present at athletic events that the ATC's are covering and can be brought over immediately in an emergent situation when contacted.

Active shooter- "There is an active shooter located at _____ corner of facility. Please leave at the nearest exit or seek shelter the police are on the way."

This document will be placed at doors, snack bar, training room doors, scorers/announcer table.



Emergency Action Plan

AG Cornog Stadium



Emergency Personnel

Athletic Director- Greg Decina | 484-433-2295
HHS Principal- Pete Donaghy | 610-637-4334
Athletic Trainers- Brendan Boas | 267-240-7556 & David Andreozzi | 267-303-9349
Bryn Mawr Hospital | 484-337-3000

Role of First Responders

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 - a. Call 911 (provide name, address, telephone number, number of individuals injured), condition of injured, first aid treatment, specific directions, and other information as requested.
3. Emergency equipment retrieval
4. Direct EMS to scene(if not on site) → Designate individual to open gate and direct EMS

AED Locations

9. **Back Gym Lobby** – AED is outside the Athletic Training Room on the left side in the center of the back wall.
10. **Nurses Office** - The nurse's office is located on the first floor of Haverford High school and the AED is located outside the room.
11. **Traveling AED's** – The Athletic Trainer's at HHS have two working AED's that are mobile. They will be present at athletic events that the ATC's are covering and can be brought over immediately in an emergent situation when contacted.

Weather- "Please seek shelter or go to your cars. Home team head to the locker room, away team head to Middle School Gym D."

Active shooter- "There is an active shooter located at _____ corner of facility. Please leave at the nearest exit or seek shelter if the police are on the way. Security should be the first to the gates they are responsible for, unlock the gates, and exit through them.

This document will be placed at doors, snack bar, training room doors, scorers/announcer table.

Revised: September 2023



Emergency ATHLETICS Action Plan

Satellite Campuses



Haverford Reserve



Coopertown Elementary



Manoa Elementary

Emergency Personnel

Athletic Director- Greg Decina | 484-433-2295
 HHS Principal- Pete Donaghy | 610-637-4334
 Athletic Trainers- Brendan Boas | 267-240-7556
 David Andreozzi | 267-303-9349
 Bryn Mawr Hospital | 484-337-3000

Role of First Responders

1. Immediate care of the injured or ill student-athlete
2. Activation of emergency medical services (EMS)
 - a. Call 911 (provide name, address, telephone number, number of individuals injured), condition of injured, first aid treatment, specific directions, and other information as requested.
3. Emergency equipment retrieval inside of Elementary School
4. Direct EMS to scene(if not on site) → Designate individual to open gate and direct EMS

AED Locations

12. **Elementary School Offices** – AED is outside the Athletic Training Room on the left side in the center of the back wall.
13. **Haverford Reserve CREC building office.**

14. Assumption of Risk Contract



Appendix C- Code of Conduct and Sportsmanship

1. Student-Athlete Contract

STUDENT ATHLETIC CONTRACT HAVERFORD HIGH SCHOOL

Philosophy

Interscholastic athletics supplement and support the academic mission of the school and assist students in their growth and development. We want Haverford students to value their health and wellness and this contract is a reminder of our expectations towards that goal. Participation in athletics is a privilege, not a right. Dedication, desire, teamwork, effort, goals and commitment and good citizenship are essential personal characteristics, which are necessary for an athlete to successfully participate on any team. The goal of the athletic department is to nurture these traits. In so doing, each athlete should develop a sense of pride in herself/himself, the school and community. In order to assist the athlete to achieve these goals, the following “Athletic Policies” must be understood and agreed to between the school, student athlete, and the parents.

The School District of Haverford High School is a member of the Pennsylvania Interscholastic Athletic Association (P.I.A.A) and applies the rules outlined in the P.I.A.A. Constitution and the guidelines in Board Policy 123 Interscholastic Athletics and Co-Curricular Activities.

1. Academics

To be eligible for athletic competition a student must be passing a minimum of two full credit courses. Grades will be reported weekly and if a student is not passing a minimum of two full credit courses the student will be ineligible for the week. Any student who is not passing a minimum of two full credit courses at the end of a marking period will be ineligible for three weeks (15 school days).

2. Attendance

Student athletes are expected to be in school on time everyday. A student is required to be in school by 10:46 in order to participate in practice or a game. If a student is repeatedly late the student may be ineligible to participate in sports after school. Students may not participate on the day a student has detention, out of school suspension, is completing a probationary period or has an early dismissal due to illness. Exceptions will be made if the student has an approved medical or educational excuse scheduled prior to the date of absence. If a student is absent on a day prior to a non school day, the student will have to present to the coach a parent or guardian note explaining the reason for the absence prior to participation in the event.

3. Use or Possession of Alcoholic Beverages or Drugs

Use or possession of alcoholic beverages, or illegal drugs by co-curricular participants is strictly prohibited. Separate and apart from the consequences for such behavior under the Student Discipline Code, students may be excluded from participation in co-curricular and/or interscholastic activities for forty-five (45) to one hundred-eighty (180) days, in addition to referral to the SAP for appropriate assessment. Additional offenses may result in removal from the team.

4. Criminal Offenses.

Students charged with and/or convicted of criminal offenses involving activities or behavior which in the judgment of the Administration and coaches represent a threat to the health, safety or morale of the student or other students on the team during a season may be suspended up to ten (10) days for a first offense and removed from the team for second or subsequent offenses, upon a determination that the student more likely than not engaged in the activities/behavior alleged or similar objectionable behavior.



5. Hazing

A person is guilty of hazing when, in the course of another student's entry into or affiliation with any team or club, she/he intentionally or recklessly engages in conduct which creates a risk of physical injury, emotional harm and/or creates excessive and/or intentionally cruel intimidation. Any form of "initiation or hazing" is prohibited. Athletes who violate the "hazing" rule will be subject to discipline under Board Policy 248 Unlawful Harassment, the student discipline code and are subject to removal from the team along with possible criminal referral.

6. Code of Student Conduct

Participation in an athletic event, practice, games and travel to and from school are considered an extension of the school day and therefore all behavior is governed by the student code of conduct. Violations of the Student Code of Behavior that occur during athletic events will be disciplined by grade level Principals as if they were a classroom action. Unsportsmanlike behavior and any actions noted by the PIAA will result in a minimum suspension as outlined by the PIAA with an option of additional discipline as determined by the Athletic Department and Principal.

7. Team Rules

All students are required to travel to and from events in District supplied Transportation, exceptions are to be reviewed on an individual basis prior to the event. Coaches will establish and inform students of individual team rules, regarding practice and team expectations.

SIGNATURES ARE REQUIRED TO INDICATE YOU HAVE RECEIVED A COPY OF THIS CONTRACT. THIS MUST BE RETURNED BY STUDENTS TO THEIR COACHES.

HHS Athletic Policy Agreement Form

I, (The Athlete) _____ have read and understand the athletic policies, rules, regulations and the Student Athletic Contract of Haverford High School and agree to abide by their terms that have been displayed. I also understand that this contract is in effect for the entire school year and applies to the current and subsequent athletic seasons. By signing the contract, I will be responsible for my actions in and out of the school. I also agree to sign a Declaration each sport season indicating that I have signed and read the student code of conduct.

Athlete's Signature

Date

Sport

Grade

I, (The Parent) _____ have read and understand the athletic policies of Haverford High School and agree to abide by the standards that are set for both myself and that of my child. By signing this form, I will be responsible for the actions of myself and of my child. I also understand that as an adult I am a role model for other individuals around me at sporting events and agree to conduct myself in a sportsman-like manner at all times at both home and away events. I also understand that it is a privilege to watch my child participate in an athletic event and can be asked to remove myself from an event if I cannot abide by the expectations of the District and the PIAA regarding good sportsmanship.

Parent Signature

Date

Sport

Grade



Appendix D- Rules and Regulations for Student-Athletes

1. PA Hazing Law

Pennsylvania Hazing Law – Title 24. Education Chapter 20. Health and Safety Anti-Hazing Law

[P.S.] 5352. Definitions

The following words and phrases when used in this act shall have the meanings given to them in this section unless the context clearly indicates otherwise:

“Hazing” Any action or situation which recklessly or intentionally endangers the mental or physical health or safety of a student or which willfully destroys or removes public or private property for the purpose of initiation or admission into or affiliation with, or as a condition for continued membership in, any organization operating under the sanction of or recognized as an organization by an institution of higher education.

The term shall include, but not be limited to, any brutality of a physical nature, such as whipping, beating, branding, forced calisthenics, exposure to the elements, forced consumption of any food, liquor, drug or other substance, or any other forced physical activity which could adversely affect the physical health and safety of the individual, and shall include any activity which would subject the individual to extreme mental stress such as sleep deprivation, forced exclusion from social contact, forced conduct which could result in extreme embarrassment, or any other forced activity which could adversely affect the mental health or dignity of the individual, or any willful destruction or removal of public or private property.

For purposes of this definition, any activity as described in this definition upon which the initiation or admission into or affiliation with or continued membership in an organization is directly or indirectly conditioned shall be presumed to be “forced” activity, the willingness of an individual to participate in such activity notwithstanding.

“Institution of Higher Education” Or “Institution”: Any public or private institution within this Commonwealth authorized to grant an associate degree or higher academic degree.



§ 5353. Hazing prohibited

Any person who causes or participates in hazing commits a misdemeanor of the third degree.

§ 5354. Enforcement by institution

(a) Anti-hazing Policy: Each institution shall adopt a written anti-hazing policy and, pursuant to that policy, shall adopt rules prohibiting students or other persons associated with any organization operating under the sanction of or recognized as an organization by the institution from engaging in any activity which can be described as hazing.

(b) Enforcement and Penalties:

(1) Each institution shall provide a program for the enforcement of such rules and shall adopt appropriate penalties for violations of such rules to be administered by the person or agency at the institution responsible for the sanctioning or recognition of such organizations.

(2) Such penalties may include the imposition of fines, the withholding of diplomas or transcripts pending compliance with the rules or pending payment of fines and the imposition of probation, suspension or dismissal.

(3) In the case of an organization which authorizes hazing in blatant disregard of such rules, penalties may also include rescission of permission for that organization to operate on campus property or otherwise operate under the sanction or recognition of the institution.

(4) All penalties imposed under the authority of this section shall be in addition to any penalty imposed for violation of section 3 or any of the criminal law of this State or for violation of any other institutional rule to which the violator may be subject.

(5) Rules adopted pursuant hereto shall apply to acts conducted on or off campus whenever such acts are deemed to constitute hazing.

Definition and Perspective

Hazing in high school sports programs is variously defined as a rite of passage, initiation or test of resilience that serves to authorize, permit or validate membership or status in athletics or activities. Other definitions contained in various state law prohibitions

include: Recklessly or intentionally endangering the health or safety of a student, or inflicting bodily injury on a student in connection with or as a condition of membership in a club, organization, association, fraternity, sorority or student body, regardless of whether the student so endangered or injured participated voluntarily in the activity.



Examples include (but not limited to):

- Requiring candidates to steal, vandalize or commit law violations;
- Shaving, cutting hair or marking the body of candidates;
- Requiring public behaviors that provoke ridicule or sanctions by law enforcement and school authorities;
- Requiring candidates to dress or appear in a manner that proves public ridicule;
- Requiring consumption of noxious food substances, drugs or alcohol;
- Physical punishments or extended exercises;
- Requiring candidates to endure extreme temperature environments;
- Requiring candidates to assume a painful position for an extended period;
- Sexual activity or simulated sexual activity;
- Deprivation of sleep;
- Simulations of dangerous acts that cause fear or mental anxiety, regardless of the intention or the actual danger inherent;
- Creating any safety risk for a candidate including involuntary restraint;
- Mandated servitude; and
- Demeaning or profane references to the candidate.

Cultural Norm

Hazing activities and initiations are generally conducted by older members of athletics teams. Often, these players achieved an accepted peer or team status by enduring similar treatment at an earlier time. In addition, adult community residents often report a history of older relatives and acquaintances enduring similar mistreatment over the course of several years or even decades. Because these events occur without challenge over time, they are often deeply embedded within the culture of a school, community or team. As a result, these practices have been accepted as “normal” or “usual” until recent years. More recently, courts and legislative enactments have rejected the usual justifications for hazing, such as “bonding, proving one’s courage or value to a team, suppression of ego, consent and no-harm initiations.” At both the collegiate and high school levels, serious injuries, deaths and a worsening pattern of degrading treatment have caused these justifications to lose all credibility as defenses. Moreover, these justifications lose validity in light of contemporary legislation and court findings.



Injuries and Death

Regrettably, injuries and death have resulted from these practices. As a result, these tragedies have resulted in public protests, expressions of outrage and litigation. Among the more proactive efforts has been development of Web sites that are available to any person who desires to learn more about current trends in legislation, litigation and public responses.

The Web sites are: www.stophazing.com and www.hazing.hanknuwer.com.

Legislative Trends

Forty-two states have enacted legislation that prohibits hazing and institutes a range of penalties and sanctions for hazing violations. These include:

- 1) Definitions of hazing and planning that contribute to hazing as a serious misdemeanor or felony, depending on the severity of the incident and injury or loss suffered by the victim(s).
- 2) Mandatory fines of various levels related to the severity of the violation and court judgments.
- 3) Mandates to school districts to develop local policies designed to prevent or intervene in hazing activities.
- 4) Mandatory fines for schools that fail to develop hazing prevention policies.
- 5) Mandatory requirements to report hazing and legislative immunity for those who report acts of hazing.
- 6) Loss of state financial assistance to schools or districts that do not enact local policies and measures to prevent or curtail hazing.
- 7) Legislative permission and encouragement to institute lawsuits in civil or federal courts.
- 8) Mandatory expulsions from high schools and universities for violators found guilty of hazing.
- 9) Legislation that invalidates traditional defenses, such as consent, willingness, tradition, unawareness and no-harm.



Litigation

The legislative enactments cited above, coupled with the rapid increase in litigation and legal judgments, strongly indicate that hazing is no longer an accepted practice in high school sports programs.

Federal courts have defined the mission of schools as:

- To educate all students, with the emphasis on all;
- To provide a safe and orderly environment for students to learn in, and
- To protect the health, safety and welfare of all students.

School Districts are held to a higher standard when it comes to the protection and safety of students. Coaches must discuss and have an anti-hazing policy within their team rules and regulations. It is incumbent upon all teachers, coaches, administrators and parents to educate all children on the dangers and inappropriateness of hazing in any form.

Implications for High School Athletic Personnel

The athletic personnel have the responsibility to research and understand the anti-hazing laws that his or her state has enacted and to determine whether the Board of Education, state association or National Association of Independent Schools has adopted any policy on hazing or sexual harassment. Coaches' handbooks, student and athletic handbooks, and codes of conduct for student-athletes should reflect these policies and implement strict prohibitions and consequences for participating in any hazing activities. Furthermore, the issue of hazing should be addressed in parent meetings and included in warning and prohibition statements that are signed by parents and student-athletes to ensure understanding.

Summary

Hazing has long been tolerated as a "necessary evil" and a community norm among high school athletics teams. As a result of recent serious injuries and deaths, this form of demeaning and dangerous abuse of power has been largely rejected as incompatible with human rights and educationally sound practices. Moreover, traditional justifications and defenses are no longer valid in light of contemporary legislation and litigation. In this regard, a majority of state legislatures have enacted prohibitions against these practices and litigation has been successfully initiated in civil, state and federal courts. **Simply stated, hazing cannot and will not be tolerated in the Haverford School District athletic program.**



2. Additional Hazing resources

- a. www.hazing.hanknuwer.com
- b. www.stophazing.org
- c. www.hazingstudy.org
- d. www.hazing.fsu.edu
- e. www.hazingprevention.org
- f. www.ncaa.org
- g. www.nfhs.org
- h. www.niaaa.org
- i. www.hazing.cornell.edu/issues/resources.html



3. Bullying, Harassment, Discrimination, Hazing Complaint Form



Bullying, Harassment, Discrimination, Hazing COMPLAINT FORM

The building principal, designee and/or compliance officer shall prepare a written report in a timely manner. The report shall include a summary of the investigation, a determination of whether the complaint has been substantiated as factual and whether it is a violation of this policy, and a recommended disposition of the complaint. The findings of this investigation shall be made available to the complainant and/or accused upon request. A copy shall be provided to the compliance office.

Complaint:

School:

Date of complaint:	SAFE TO SAY INITIATED?	YES	NO
Person making complaint:			
Status of Complainant: Student, Teacher, Support Staff, Parent			
Name(s) of offender:			
What is the relationship between the individual engaging in the questionable behavior and the target or victim (e.g. teacher/student; student/student, etc.)			
Complaint details: (Describe the incident as clearly as possible, including any graphic, written,			



electronic, verbal or non-verbal acts (i.e. offensive jokes, slurs, epithets and name-calling, ridicule or mockery, insults or put-downs, offensive objects or pictures, physical assaults or threats, intimidation, demands or other conduct) and any actions or activities.

Was any action taken to attempt to stop the reported behavior? Describe.

Was allegation of bullying or harassment related to (Circle):

- Based on sex (male, female) sexual orientation
- Based on race, color, or national origin
- Based on disability
- Based on age
- Based on Gender
- Based on Religion
- Based on Hazing
- None of the above
- Other

Notes:



Time and Location: When and where the incident occurred:

List any witnesses who were present:

Was this incident reported to anyone else? If so, identify to whom and when?

Signature of Parent/Guardian Filling Out Form

Date

STOP

-----The information below will be filled out by Principal, Designee, or Compliance Officer as part of the investigative process-----

Investigation

Disposition:



For this investigation, I reviewed the following documents;

For this investigation I interviewed the following individuals;

Findings:

Was this incident a violation of:

Policy #248 (Unlawful Harassment) YES NO

Policy #249 (Bullying/Cyberbullying) YES NO

Policy #259 (Gender Expansive & Transgender Students) YES NO



Appendix E- Post-Secondary Athletics

1. NIL- Name, Image, and Likeness Information

As you may be aware, on December 7, 2022, the Pennsylvania Interscholastic Athletic Association (PIAA) passed a Name, Image and Likeness (NIL) amendment to its bylaws, Article II, Section 3(J), which permits your child/you to receive consideration for the use of your child's/your name, image and likeness, and more specifically, the value that your child/you may bring to a particular business, service, activity, etc.

While this amendment provides new opportunities for your child/you, it also places specific prohibitions on the type of NIL engagements that your child/you may agree to, and failure to comply with the requirements below could result in your child's/your forfeiture of amateur status, and thereby, the ability to compete in interscholastic events on behalf of the School District of Haverford Township. Below is a list of NIL parameters that have been established by the PIAA:

- Your child's/Your acceptance of consideration (both monetary and "in-kind," which includes, but is not limited to, free or discounted equipment, clothing, or training sessions, etc.) may **not** be contingent on enrollment in or transfer to a particular PIAA school;
- When engaging in NIL appearances, social media posts, advertisements and the like, your child/you may **not** wear clothing or items referencing the: PIAA, PIAA District I, Central Athletic League, School District of Haverford Township or any District schools, your child's/your team name, team nickname, team uniforms or related clothing, team or school logos, or terms which your child's/your team name is commonly referred to (for example, filming an NIL advertisement while wearing a sweatshirt that says "Fords Athletics" or endorsing an NIL partner on your child's/your social media page that also identifies your child's/your status as a Haverford, Central League or PIAA student or athlete);
- Your child/You may **not** make NIL promotions or endorsements during team/school activities;
- Your child/you may **not** wear apparel or display a logo, insignia or identifying mark of an NIL partner during school/team athletic activities **unless** it is part of the standard school uniform for that sport (i.e., use of bats, sticks, gloves, clubs, etc., that your child/you receive(s) NIL endorsements for is generally permissible; however your child/you may not advertise the NIL endorsement during pre or post-game interviews and/or media coverage);



- Your child/you may **not** engage in any NIL activities involving, displaying, or endorsing the following categories of products and services:
 - (1) Adult entertainment products and services;
 - (2) Alcohol products;
 - (3) Casinos and gambling, including sports betting, the lottery, and betting in connection with video games, on-line games and mobile devices;
 - (4) Tobacco and electronic smoking products and devices;
 - (5) Opioids and prescription pharmaceuticals;
 - (6) Controlled dangerous substances;
 - (7) Weapons, firearms and ammunition.
- Your child/you **must** provide a copy of any NIL agreement to your child's/your school's athletic director within seventy-two (72) hours of signing so the terms can be reviewed for compliance.

Alternative: Students must provide a copy of any NIL agreement to their school's athletic director prior to signing so the terms can be reviewed for compliance.

If the agreement is not reduced to a written form, then your child/you must contact Greg Decina (Athletic Director) and provide all of the terms of the agreement within the timeframe described above.

School District of Haverford Township employees, staff members, coaches, booster clubs, collectives, administrators, alumni and affiliates are prohibited from soliciting, arranging, negotiating, or paying for a student's (other than their own child's) NIL engagements, and therefore, in an effort to maintain each one of our student-athletes' eligibilities, District employees will not be able to counsel your child/you with regard to any NIL opportunities that they/you may have.

The District will provide updates regarding NIL requirements and any changes in NIL regulations as this information becomes available from the PIAA. Please direct any questions or concerns to Greg Decina at GDecina@haverfordsd.net.