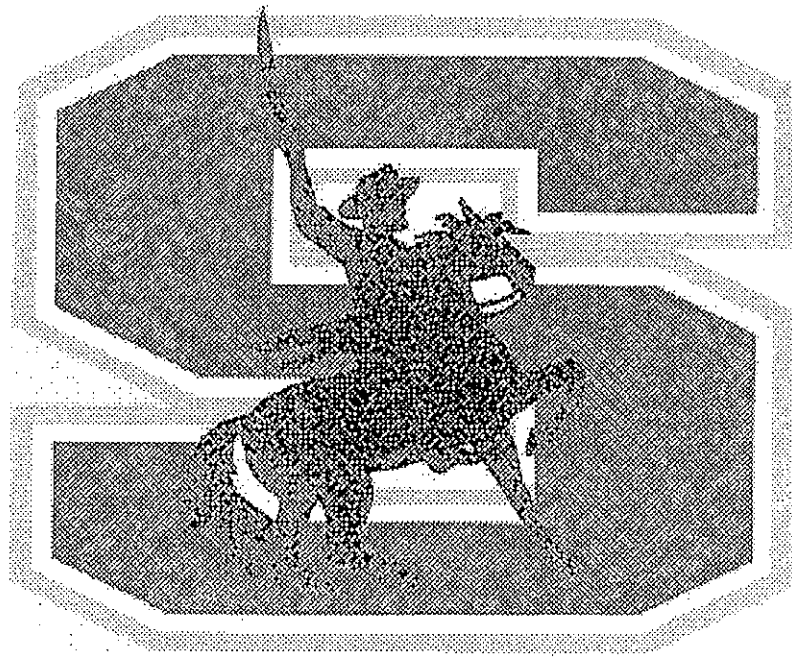


PRE-SEASON ATHLETIC FORMS



ATTACHED IS THE SHERIDAN ATHLETIC POLICY, STUDENT-ATHLETE ELIGIBILITY GUIDE, NCAA CLEARINGHOUSE AND ELIGIBILITY CENTER, NORTHERN LOCAL ATHLETIC FORM, ELIGIBILITY CHECKLIST, CONCUSSION INFORMATION FORM, PHYSICAL FORM, OHSA AUTHORIZATION FORM, AND BOOSTER INFORMATION.

WHAT IS IN THIS PACKET?

1. **Pages 1-5: Sheridan Athletic Policy.** Nothing needs signed or returned, but you must read. You are responsible to be informed.
2. **Pages 6-10: 2013-2014 Student-Athlete Eligibility Guide.** Nothing needs to be signed or returned, but you must read. You are responsible to be informed.
3. **Pages 11-12: Alert concerning NCAA Clearinghouse and Eligibility Center.** Nothing needs to be signed or returned.
4. **Page 13: THE NORTHERN LOCAL ATHLETIC FORM. THIS FORM MUST BE SIGNED AND RETURNED TO YOUR COACH! *(Coaches will keep on file)***
5. **Pages 14-15: CONCUSSION INFORMATION FORM. PAGE 15 MUST BE SIGNED BY BOTH STUDENT-ATHLETE AND PARENT/GUARDIAN AND RETURNED TO YOUR COACH! *(Coaches will keep on file)***
6. **Pages 16-19: Blank Physical Form.** Athlete needs current form on file in Athletic Office. Physicals are good for one calendar year. **Physical Forms are kept on file in the Athletic Department Office.**
7. **Pages 20-21: OHSAA Authorization Forms.** Athlete needs one completed form on file in Athletic Office during HIGH SCHOOL career (usually incoming freshmen). *This form will only have to be filled out by athletes who have not participated in the past. This form was included with school provided physicals in the Spring.*
8. **Page 22: ELIGIBILITY CHECKLIST**
9. **Pages 23-26: Sheridan Boosters “Kroger Rewards”, Athletic Booster Parent Information, Sports Medicine @ Grant Medical and attendance information (must read).**

MESSAGE TO ATHLETIC PARENTS

This handbook has been prepared for those students who have indicated a desire to participate in inter-Scholastic athletics. As students elect to participate, there are many questions that either you or your son or daughter may have regarding the athletic program. The purpose of this handbook is to answer as many questions about the policies and philosophy of the program as possible.

While the benefits of participation are numerous, it is important that you also recognize that each time you participate in athletics you are assuming certain risks. The safety of your son or daughter is very important, but statistically we need to realize that students will become injured at one time or another. As a result, each sport involves certain rules, regulations, and precautions, which are designed to protect participants. We urge all parents and athletes to understand the risks involved in each sport.

We are hopeful that this handbook will be of help to you and that your involvement with this athletic program is a rewarding experience.

II

PHILOSOPHY

The athletic program in the Northern Local School District is an important part of the educational experiences provided to our students. We believe that an athlete participates in sports by choice. In making that choice to participate the student-athlete must also choose between the rules of athletics and non-participation. Participation in athletics is a privilege.

The most important goal of the Northern Local School District Extra-curricular Programs is to provide every participant the opportunity to grow mentally, emotionally, morally, and physically. We further believe that extra-curricular activities are important in the development of character, leadership, responsibility, and the enhancement of a positive attitude.

The athletic program is a source of great pride in our community. These student-athletes, as representatives of this district, must realize they are under the watchful eyes of not only this community but anyone they come in contact with. We expect everyone involved in the athletic program to behave in such a manner that it fosters that pride. To aid these student-athletes in grades seven through twelve, Northern Local School District has set forth a set of rules and regulations by which participants in extra-curricular activities shall abide.

The Northern Local School District is a member of the Ohio High School Athletic Association and the Muskingum Valley League. The athletic program will conform to the principles, policies, and regulations governing amateur athletics prescribed by these organizations. Local board policy will supersede policies set forth by the OHSAA and the MVL.

NLSD BOARD POLICY

1. All athletic purchases of supplies and equipment must be requisitioned through the athletic director and treasurer prior to placing of order.
2. All fund raising activities must be approved prior to ordering by the school principal and district treasurer.
3. Any income derived under the Northern Local School District name must be deposited in the appropriate activity account with the district treasurer.
4. All coaches and athletes are responsible for the proper care and security of equipment and uniforms. School issued items are to be worn for contests and practice only. All equipment not returned in good condition at the end of the season will be subject to a financial penalty.
5. All coaches and athletes shall dress presentably at all times, on trips, or at assemblies or banquets. Coaches may instill a grooming and dress code for their respective sports.
6. No school-sponsored athletics of any kind will be permitted on Sunday without administration approval.
7. If school is canceled for any reason, all athletic events including practice in grades 7-9 will also be canceled. Varsity teams may practice but cannot make practice mandatory. Northern local administrators will determine if a varsity contest will be played that day.
8. All athletes must ride the school bus to and from all athletic events. Parents or legal guardians may sign out only their son or daughter following a contest to ride home with them. Under no circumstances should an athlete be permitted to drive to an athletic event.
9. All Northern Local athletic forms including a physical must be signed and turned in to the head coach by the start of the first practice.
10. If illness or injury prevents an athlete from participating in a try-out situation, the decision will be left up to the discretion of the head coach or advisor of that activity as to said athlete's participation.
11. An athlete that quits or is dismissed from a team will not be allowed to participate in another sport during that sport season. Athletes cut from one sport will be encouraged to try out for another sport.
12. Athletes that have been suspended or expelled by the Sheridan high or middle school may not participate in athletics for the duration of the suspension.
13. Athletes must be in attendance at school for all assigned classes the morning following a mid-week contest unless excused by the high school principal or athletic director. Violation will cause the athlete to be ineligible for the next scheduled athletic event.
14. Athletes must be in attendance at least one-half day (2 blocks) in order to be eligible to practice or participate in a scheduled athletic event for that day unless excused by building principal or athletic director.
15. Athletes should consult his/her coach prior to missing practice for whatever reason. The respective coaches will handle illness, vacations, or conflicts with other activities. An athlete who misses practice for reasons other than illness may want to reassess their commitment to being an athlete.

IV

ATHLETIC CODE OF CONDUCT

A firm and fair policy of enforcement is necessary to uphold the regulations and standards of the athletic department. The community, school administrators, and the coaching staff feel strongly that high standards of conduct and citizenship are essential in maintaining a sound program of athletics. The welfare of the student athlete is our major consideration and transcends any other consideration.

All athletes shall abide by a code of conduct, which will earn them the honor and respect that participation and competition in the interscholastic program affords. Any conduct that results in dishonor to the athlete, the team, or the school will not be tolerated. Acts of unacceptable conduct, such as, but not limited to, theft, vandalism, disrespect, immorality, or violations of law, tarnish the reputation of everyone associated with the athletic program. The athletic code of conduct will be in effect twelve months a year.

Eligibility

In order to be eligible in grades 9-12, a student must be currently enrolled and have been enrolled in school the immediately preceding grading period. During the preceding grading period, the student must have received passing grades in a minimum of five one-credit courses or the equivalent, which count toward graduation.

Note: In addition to the credit requirement for eligibility, all Northern Local students must earn a G.P.A. of a 1.0 in the immediately preceding grading period.

In order to be eligible in grades 7-8 a student must be currently enrolled and have been enrolled in school the immediately preceding grading period and received passing grades during that grading period in 75% of those subjects carried the preceding grading period in which the student was enrolled.

Note: See G.P.A. requirement above.

Individual Sport Rule

Coaches may establish additional rules and regulations for their respective sports. Infractions of team rules may lead to dismissal from the team. Penalties will be designated/handled by the respective coaches.

Basic Training Rule

Any student involved in theft, vandalism, using or possessing alcohol or tobacco, or using, possessing, buying, or selling counterfeit drugs, lookalike drugs, illegal controlled substances, or any substance represented to be an illegal substance, shall be denied participation in interscholastic athletics.

Note: This rule is to be enforced twelve months a year.

First Violation of Basic Training Rule

MUST READ

Denied participation from athletic competition for 50% of the scheduled contests of that sport. Any remaining percentage of the denial of participation not served shall be applied toward the next sport in which the athlete participates. All rules and requirements of the sport team including practice must be followed by the athlete during the period of denied participation.

Second Violation of Basic Training Rule (of any type)

Upon confirmation of the second violation, athletic participation will be denied for one full calendar year. The athlete may be permitted to practice with coach's approval. All rules and requirements of the sport team must be followed by the athlete during the period of denied participation.

Note: Athletes in grades 9-12 found to be in violation of basic training rules for the second time will be given the option of getting remediation which may include diagnosis, counseling, or treatment as deemed necessary by appropriate professionals. After successful completion in a pre-approved remediation program, the athlete may then petition for reduction of penalty to one full sports season. Documentation of such treatment, including a written report concerning the treatment given and results of such treatment, must be provided to principal or athletic director. All costs are the responsibility of parent or guardian.

Note: Athletes in grades 7/8 found to be in violation of basic training rules for the second time will be treated as above unless the second violation occurs one full calendar year after the first, then it shall be treated as a first violation.

Third Violation of Basic Training Rule (of any type)

The student-athlete found in a third violation of the training rules shall be denied participation for the remainder of their high school career. The athlete may petition the superintendent for reinstatement one year following date of third offense, contingent upon a showing of substantiated rehabilitation.

Penalty Definitions

MUST READ

1. To calculate the percentages of penalty for denial of participation, the number of regular season contests scheduled will be used for each respective sport. Post season contests will not be considered in the calculation.
2. When a penalty results in a denial of a partial contest, the fraction will be rounded off to the nearest whole contest.

Example: 3.49 contests will be 3 contests

3.50 contests will be 4 contests

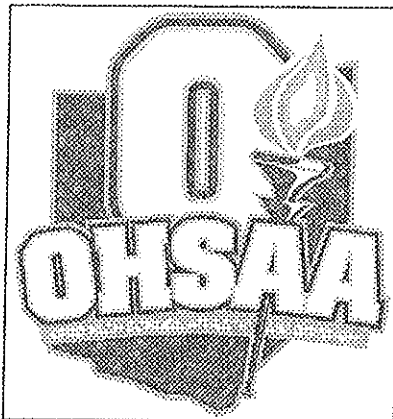
3. A suspended athlete who has a carry-over penalty into a succeeding sport must complete the season in that sport in good standing in order for the suspension to be credited to that sport.
4. For the purpose of this code, a contest is defined using the OHSAA guidelines for scheduling.
5. For the purpose of this code, a scrimmage is not considered as a contest. It is considered another practice session.

Appeals Procedure

Any denial of participation resulting from a violation of any of the basic training rules may be appealed to the SHS Appeals Board.

The SHS Athletic Appeals Board will consist of the high school principal, the athletic director, the student/athlete's coach, and the head coach of that sport. The appeal will require the following:

1. The written appeal must be presented to the athletic director within 72 hours of the initial ruling.
2. The student shall have the privilege of representation although this appeal is not a legal process.
3. The Appeals Board shall render a decision within one day in writing to the student and his/her parents or guardian.



2013-14 Edition

Eligibility Guide for Participation In High School Athletics

Published by the Ohio High School Athletic Association (revised 5/1/13)

Ohio High School Athletic Association

Overview

Participating in your school's interscholastic athletics program will provide some of your most memorable and enjoyable moments ever. Since your school is a member of the Ohio High School Athletic Association, there are standards that must be met in order to be eligible to compete.

The essential eligibility requirements in this publication are only a summary of some of the regulations affecting student eligibility. Most requirements are published in the *OHSAA Handbook*, which can be found in the offices of your principal and athletic administrator and is posted on the OHSAA website (OHSAA.org). Your school district also has the authority to establish additional academic standards and codes of student or athletic conduct.

Any questions you have concerning the OHSAA standards or your athletic eligibility should be reviewed with your school principal or athletic administrator. You should also meet with these administrators EVERY TIME before you change your course schedule or drop a course. If you are a transfer student, you must ensure that you and your school administrators have submitted all proper forms to the OHSAA Office in Columbus.

The eligibility regulations of the OHSAA have been adopted by the member schools and were accepted by your school when it became an OHSAA member. You are urged, as a student-athlete, to study these standards carefully since you are responsible for compliance with these standards.

Best wishes as you learn the valuable lessons that come with your participation in interscholastic athletics!

Student-athletes and parents have the opportunity to ask school administrators and/or coaches questions on OHSAA and school eligibility requirements, the school's Athletic Code of Conduct policy and other issues during preseason meetings that the OHSAA requires schools to hold no later than two weeks after the beginning of each sports season. Meetings should include showing a video presentation prepared by the OHSAA that reviews key student eligibility issues, healthy lifestyles, sporting behavior and concussion management.

OHSAA Regulations On

Scholarship

You may attend any public or non-public high school in which you are accepted when you enter high school (grade 9) from a 7th-8th grade school. In order to maintain eligibility for grades 9-12, you must be currently enrolled in a member school and have received passing grades in a minimum of five (5) one credit courses, or the equivalent, in the immediately preceding grading period.

- A student becomes a member of an interscholastic squad, and thus establishes eligibility, when he/she participates in a contest (scrimmage, preview or regular season game).
- You may not use summer school grades for failing grades received or lack of courses taken in the final grading period.
- Your semester or yearly grades have no effect on OHSAA eligibility.
- Those taking postsecondary school courses must comply with OHSAA scholarship regulations.
- The eligibility or ineligibility of a student continues until the start of the fifth school day of the next grading period, at which time the grades from the immediately preceding grading period become effective. **Note:** Check with your principal or athletic administrator to determine the exact date that eligibility will be restored.

OHSAA Regulations On

Semesters

After establishing ninth-grade eligibility, you are permitted only eight (8) semesters of athletic eligibility.

- The semesters are taken in order of attendance once ninth-grade eligibility has been established.
- Semesters are counted toward eligibility whether you participate in interscholastic athletics or not.

- There are exceptions to this regulation, so please arrange a meeting with your principal or athletic administrator to review these exceptions.

OHSAA Regulations On

Age

High school students (grades 9-12) who turn 19 years of age prior to August 1, 2013, are ineligible for interscholastic athletics.

- There are exceptions to this regulation, so please arrange a meeting with your principal or athletic administrator to review these exceptions.

OHSAA Regulations On

Home Schooling

If you are home schooled and also enrolled in an OHSAA member school in accordance with the school's board-adopted partial enrollment policy, you may be eligible for interscholastic athletics participation at the school where you are enrolled and attending.

- To be eligible, you must enter the OHSAA member school from home schooling at the beginning of the school year after having been home schooled for at least one calendar year.
- Failure to meet the one-year provision will require you to be enrolled for a minimum of one grading period before eligibility can be granted.

OHSAA Regulations On

Transfers

Once your eligibility is established at a high school, a transfer to a different high school will mean you will lose eligibility for interscholastic athletics at your new school. For the specifics on the period of ineligibility, visit OHSAA.org.

- If you are new to this school as a transfer student, all required paperwork must be submitted to the OHSAA, and the state office must grant approval for eligibility. Immediate eligibility will be granted only if one of the exceptions to the OHSAA transfer regulation has been met.
- To see if you qualify for an exception, you and your parents should arrange a meeting with your principal or athletic administrator.
- If your parent or legal guardian lives outside of Ohio, you are ineligible unless one of the exceptions to the regulation is met. These exceptions to the out-of-state residency rules are found in Bylaw 4-6.
- If additional questions concerning these regulations remain, school principals or athletic administrators should contact the OHSAA.

OHSAA Regulations On

Awards

You may receive awards valued at \$200 or less as a result of athletic participation in interscholastic athletics from any source. You may never accept cash awards, however.

OHSAA Regulations On

Amateurism

You will lose your amateur status and forfeit your eligibility if you:

- Compete for money or other compensation.
- Capitalize on your athletic fame by receiving money, merchandise or services.
- Sign a contract or make a commitment to play professional athletics.
- Receive services, merchandise or any form of financial assistance from a professional sports organization.
- Compete with a professional athletics team even if no pay is received.
- Enter into an agreement with a sports or marketing agent.

Expenses for travel, meals and lodging may be accepted provided they are available to all participants and they are not contingent upon your team's and/or your finish.

OHSAA Regulations On

False Information

If you compete under a name other than your own or provide a false address, you immediately become ineligible.

OHSAA Regulations On

Open Gyms

School officials may designate open gyms/facilities, the sport to be played, the grade levels involved and may also limit participants to those from your school. You may participate in open gyms/facilities, but remember:

- No one from the respective school may be excluded from participating;
- No one may be required to attend;
- No school officials may invite selected students or determine the teams;
- No school officials may transport students to or from either school or non-school facilities;
- No timing or written scoring may be kept, and
- No coaching or instruction may be provided.

The OHSAA may impose penalties against you, your school and/or your coach for violating these regulations.

OHSAA Regulations On Instruction

There are restrictions on the instruction you can receive from school coaches outside of your season. Some of these regulations are also different for team sports vs. individual sports. Before receiving instruction outside the season from your school coaches, visit OHSAA.org, go to the General Sports Regulations and review the section on Instructional Programs to ensure all regulations are being followed. Some other key notes on these regulations:

- Besides during the season of your sport, school coaches may also provide team instruction for a maximum of 10 days between June 1 and July 31. This would include such activities as volleyball, field hockey, soccer, basketball, ice hockey, baseball or softball teams competing in tournaments or 'shootouts,' football teams participating in 7-on-7 competitions, or coaches conducting or taking teams to instructional camps.
- Individual skill instruction from non-school coaches may be received in any sport by a squad member at any time in individual lessons *provided* that these individual skill instructions do not violate any Board of Education, school administrators' or coaches' policies.
- It is a violation if a coach suggests your participation in instructional programs is mandatory.

OHSAA Regulations On Non-School Teams

If you compete on a non-school team in the same sport during your school team's season, you will lose eligibility. There are also certain restrictions regarding tryouts, practices and competitions with non-school teams before, during and after the school season. Before participating with a non-school team, visit OHSAA.org, go to the General Sports Regulations and review the sections on Non-Interscholastic Programs to ensure all regulations are being followed. Some other key notes on these regulations:

- A member of an interscholastic squad in a team sport (baseball, basketball, field hockey, ice hockey, soccer, softball and volleyball) may not participate in an athletic contest, tryouts or any type of team or group training or practices on or with a non-school squad in the same sport during the school's interscholastic season. **This would include college teams and/or college tryouts.**
- In the individual sports of bowling, cross country, golf, gymnastics, swimming and diving, tennis, track and field and wrestling, however, you may practice and try out for a non-school team but may not compete in a contest.

- A member of an interscholastic squad in a team sport (baseball, basketball, field hockey, ice hockey, soccer, softball and volleyball) may try out, practice and compete on non-school teams before and after the school season from August 1 to May 31 provided:

The OHSAA's '50 percent limitation' regulation is maintained, meaning the number of students from the same school team on the roster of the non-school team is limited to five (5) students in the sports of soccer, field hockey and ice hockey; four (4) students in the sports of baseball and softball; three (3) students in the sport of volleyball, and two (2) students in the sport of basketball. School football team members are prohibited from competing on non-school teams except from June 1 to July 31. **Note:** Seniors are exempt from these limitations after the conclusion of their sport season.

- There is no limit on the number of students from the same school team that may participate on the same non-school team from June 1 to July 31.
- Check the OHSAA Sport-by-Sport Regulations (available at OHSAA.org) for the date you must cease participation on non-school teams in order to be eligible for OHSAA tournament competition along with penalties for non-compliance with this date.

OHSAA Regulations On Recruiting

You will be declared ineligible if you are recruited by a person or group of persons to change or enroll in a high school for athletic purposes. Any attempt by you to recruit a prospective student-athlete for athletic purposes is also prohibited. A violation may also affect the eligibility of the school team.

OHSAA Regulations/Guidance On Alcohol, Tobacco, Drugs and Steroids

The OHSAA does not permit the use of any form of alcohol, tobacco or illegal drugs at the site of all interscholastic contests. Besides the health risks involved, use of any of these items will result in you being disqualified from contests and likely facing additional school and legal penalties. There are additional issues related to illicit drugs, such as anabolic steroids and some prescription drugs used with the goal of aiding performance. If you use anabolic steroids or other performance-enhancing drugs, you are ineligible for interscholastic competition until medical evidence indicates that your system is free of these drugs.

Another prominent issue is the use of supplements. The increased availability of these items

allows student-athletes access to a wide variety of products aggressively marketed in fitness and strength training magazines and websites. Often their marketing campaigns include promises, endorsed by faulty research claims, of extraordinary weight loss, explosive power or tremendous strength gains. It is important for coaches, athletic administrators and parents to educate themselves about what substances your student-athletes may be using and about the potential risks involved with uneducated supplement use.

OHSAA.org offers a wealth of information for parents, coaches and students about these topics and other healthy lifestyles/sports medicine issues.

OHSAA Regulations On Preparticipation Evaluations and Consent Forms

Before the season's first practice, each student must have had a physical examination within the past year and an examination form signed by a medical examiner must be on file at your school.

- Physical examinations are valid for one year from the date of the exam except for those that take place from May 1-June 1. Those exams are valid for one year plus through the end of the next school year.

In addition, no student will be eligible unless that student and his or her parents have signed the OHSAA Authorization Form and the OHSAA Eligibility & Authorization Statement, both of which must be on file at your school.

OHSAA Regulations and Expectations On Concussion Management

It is everyone's responsibility to take the necessary precautions to reduce the likelihood of brain injuries. This is not just a problem in football . . . concussions can happen in just about any sport!

A concussion is a traumatic brain injury that interferes with normal function of the brain. "Dings" and "bell ringers" are serious brain injuries and you do not have to have loss of consciousness for it to be considered serious. Young athletes are at increased risk for serious problems.

In Ohio, any athlete who exhibits signs, symptoms, or behaviors consistent with a concussion, such as loss of consciousness, headache, dizziness, confusion or balance problems, shall be immediately removed from the contest or practice and shall not return to play that same day. Thereafter, the student shall not return to practice or competition until cleared with written authorization from a physician or health care provider approved by the local board in accordance with state law.

Each school is required to review its concussion management protocol with students and their parents. In addition, each student and his or her parents must review and sign the Ohio Department of Health's "Concussion Information Sheet" prior to participation and are highly encouraged to review a short presentation on concussions available at no cost at nfhslern.com.

OHSAA Regulations and Expectations On Sporting Behavior

The OHSAA's vision for positive sporting behavior is built on expectations. It calls on the school community — administrators, teachers, coaches, students, parents and fans — to strive for positive sporting behavior in everything they do by teaching the value of ethics, integrity, equity, fairness and respect.

As a student-athlete, you are expected to accept the responsibility and privilege of representing your school and community while participating in school sports. You are expected to:

- Treat opponents, coaches and officials with respect, and
- Ensure your actions do not incite fans or other participants or attempt to embarrass, ridicule or demean others.

The OHSAA has established a policy for students ejected for unsporting behavior or flagrant fouls. If you are ejected:

- You will be ineligible for all contests for the remainder of that day, and
- You will be ineligible for all contests at all levels in that sport until two regular season/tournament contests are played at the same level as the ejection (one contest in football).

If you are ejected a second time in a season, you are subject to additional, stiffer penalties, including a maximum penalty of suspension from play for the remainder of the season in that sport.

As a participant in school sports, you are expected to act with dignity, speak with courtesy and play with pride. In short, Respect The Game!

Note: The complete OHSAA ejection policy for unsporting behavior can be found in the *OHSAA Handbook* and is posted at OHSAA.org.

Interscholastic Athletics

Why We Play The Games

For many of you, playing on your school teams may be the last time you will participate in competitive athletics. As a participant, you should work hard, have fun and strive to be the best. But just as important, you should also strive to be the best students, teammates and members of your community in preparation for the next phase of your life as a responsible adult and productive citizen.

The purpose of interscholastic athletics is to enrich your high school experience; promote citizenship and sportsmanship; instill a sense of pride in community; teach lifelong lessons of teamwork and self-discipline, and help you grow physically and emotionally. In short, interscholastic athletic programs are educational in nature and therefore an extension of the classroom.

Other sporting organizations promote free player movement, are primarily designed to promote athletic development of the individual, and provide a showcase for the athletic talents of those individuals. However, these organizations do not share the primary educational purposes of OHSAA member schools and therefore cannot provide the unique type of competition created by the OHSAA through our member schools.

Statistics show that students who participate in interscholastic athletics programs tend to have higher grade-point averages, better attendance records, lower dropout rates and fewer discipline problems than the general student population. Statistics also show that only one percent of all high school participants will earn a Division I college athletic scholarship and approximately five percent will play collegiately in any division. Unlike major colleges and professional sports teams, interscholastic athletic programs do not exist to entertain spectators.

As your parents can attest, high school goes by in a blur, but your memories of participating in school sports will stay with you for a lifetime. The OHSAA wants to make sure your time as a high school student-athlete is meaningful and memorable.

The privilege of participating in educational athletics is one of the most exciting experiences of your life. Please maintain the proper perspective in this journey and remember why we play the games.

A Look At The

Ohio High School Athletic Association

Participating in your school's interscholastic athletics program is not only a privilege, but also provides memorable experiences. The role of the OHSAA is to:

- Help ensure students are provided a positive environment for athletic participation;
- Ensure all rules, regulations and decisions are fair and equitable for all schools and participants;
- Ensure athletes play under safe conditions, and
- Ensure school sports programs remain a vital part of your educational experience.

Like the other 825 public and non-public high schools and approximately 800 7th and 8th grade schools, your school has volunteered to become a member of the OHSAA. Ohio is one of the top ranked states in the country with over 350,000 high school students competing in 24 sanctioned sports.

The OHSAA Commissioner and his staff are based in Columbus and their primary responsibilities are to:

- Interpret the rules and regulations for member schools;
- Conduct tournaments for high schools including sectionals, districts, regionals and state tournaments, and
- Serve as educators for officials, coaches, administrators and student-athletes and their parents.

As a member of the OHSAA, administrators and coaches annually affirm they will follow the OHSAA regulations that are approved by the membership. Any changes to those regulations must be approved by a majority of member school principals.

The OHSAA does not charge schools any membership fees or tournament entry fees. Schools are provided rulebooks, educational materials and other printed items along with catastrophe insurance coverage for all participants at a cost of approximately \$600,000 annually. Additionally, schools are reimbursed for many of their tournament expenses and have the opportunity to keep a portion of receipts from the sale of tournament tickets.

Other key programs and initiatives of the OHSAA include:

- Providing annual scholarships totaling over \$100,000 to students who excel in athletics and academics;
- Licensing, registering and training nearly 17,000 contest officials, and
- Ensuring coaches are certified to work with student-athletes through an ongoing coach education program.

ALERT for high school athletes and parents

NCAA Clearinghouse and Eligibility Center

Any high school student-athlete with the talent and desire to play NCAA Division I or Division II college athletics and receive a scholarship/grant-in-aid to do so must be aware of the academic guidelines.

It is imperative that planning begin in 9th grade to meet these guidelines. Problems arise when senior students alert high school officials of their plan when, unfortunately, sometimes it is too late.

All parents and student-athletes should be aware of and follow the guidelines listed below to the best of their ability. See your high school counselor and consult the NCAA website at www.eligibilitycenter.org for more specific details.



NCAA FRESHMAN-ELIGIBILITY STANDARDS QUICK REFERENCE SHEET

KNOW THE RULES:

Core Courses

- **NCAA Division I requires 16 core courses as of August 1, 2008.** This rule applies to any student first entering any Division I college or university on or after August 1, 2008. See the chart below for the breakdown of this 16 core-course requirement.
- **NCAA Division II requires 14 core courses.** See the breakdown of core-course requirements below. Please note, Division II will require 16 core courses beginning August 1, 2013.

Test Scores

- **Division I** has a sliding scale for test score and grade-point average. The sliding scale for those requirements is shown on page two of this sheet.
- **Division II** has a minimum SAT score requirement of 820 or an ACT sum score of 68.
- The SAT score used for NCAA purposes includes only the critical reading and math sections. The writing section of the SAT is not used.
- The ACT score used for NCAA purposes is a sum of the four sections on the ACT: English, mathematics, reading and science.
- **All SAT and ACT scores must be reported directly to the NCAA Eligibility Center by the testing agency.** Test scores that appear on transcripts will not be used. When registering for the SAT or ACT, use the Eligibility Center code of 9999 to make sure the score is reported to the Eligibility Center.

Grade-Point Average

- Only core courses are used in the calculation of the grade-point average.
- **Be sure** to look at your high school's list of NCAA-approved core courses on the Eligibility Center's Web site to make certain that courses being taken have been approved as core courses. The Web site is www.eligibilitycenter.org.
- **Division I** grade-point-average requirements are listed on page two of this sheet.
- The **Division II** grade-point-average requirement is a minimum of 2.000.

DIVISION I 16 Core-Course Rule

16 Core Courses:

- 4 years of English.
- 3 years of mathematics (Algebra I or higher).
- 2 years of natural/physical science (1 year of lab if offered by high school).
- 1 year of additional English, mathematics or natural/physical science.
- 2 years of social science.
- 4 years of additional courses (from any area above, foreign language or non doctrinal religion/philosophy).

DIVISION II 14 Core-Course Rule

14 Core Courses:

- 3 years of English.
- 2 years of mathematics (Algebra I or higher).
- 2 years of natural/physical science (1 year of lab if offered by high school).
- 2 years of additional English, mathematics or natural/physical science.
- 2 years of social science.
- 3 years of additional courses (from any area above, foreign language or non doctrinal religion/philosophy).

PLEASE NOTE: Beginning August 1, 2013, students planning to attend an NCAA Division II institution will be required to complete 16 core courses.

MUST RETURN TO COACH (COACH KEEP WITH YOU AT ALL TIMES)

Northern Local Athletic Forms

ACKNOWLEDGEMENT OF POLICIES AND PROCEDURES

We have read and understand the RISKS, GENERAL RULES, CODE OF CONDUCT, and OHSAA ATHLETIC ELIGIBILITY REQUIREMENTS, associated with playing sports in the Northern Local Schools.

Signature of Parent or Guardian _____

Signature of Student Athlete _____

INSURANCE WAIVER

We, the undersigned, understand that the Northern Local Schools will **not** be responsible for medical costs associated with the treatment of any injuries incurred while participating in any athletic related activities associated with the Northern Local Schools.

Signature of Parent or Guardian _____ Date _____

Check the statement below which accurately describes your insurance situation:

_____ Yes, We have insurance coverage which will cover the costs of any injuries to our daughter/son.

_____ No, We do **NOT** have insurance coverage for our daughter/son, and we understand that our daughter/son will not be permitted to practice, compete, or participate in any school athletic activity until we furnish evidence that we have purchased insurance coverage to cover the costs of any injury to our daughter/son.

Coaches have information on insurance coverage that may be purchased for athletes. Parents interested in this information should see their athlete's coach.

EMERGENCY MEDICAL AUTHORIZATION

Athlete's Name _____ Date _____

Parent or Guardian to be notified in case of emergency _____

Home Phone _____ Work Phone _____ Cell Phone _____

Hospital Preferred _____ Phone _____

Doctor Preferred _____ Phone _____

Dentist Preferred _____ Phone _____

If I cannot be contacted, I grant permission for my child to be transferred to any hospital for treatment.

Signature of Parent of Guardian _____

This form must be completed and returned to the coach before the athlete may participate



SHERIDAN HIGH SCHOOL

8725 SHERIDAN ROAD N.W., THORNVILLE, OH 43076 PHONE: 740-743-1335

Chris King, Principal

Tyrone Davis, Assistant Principal

Lance Dupler, Athletic Director

Concussion Information Form

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

Symptoms may include one or more of the following:

- | | |
|--|---|
| <ul style="list-style-type: none"> • Headaches • "Pressure in head" • Nausea or vomiting • 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 • Change in sleep patterns | <ul style="list-style-type: none"> • Amnesia • "Don't feel right" • Fatigue or low energy • Sadness • Nervousness or anxiety • Irritability • More emotional • Confusion • Concentration or memory problems (forgetting game plays) • Repeating the same question/comment |
|--|---|

Adapted from the CDC and the 3rd International Conference in Sport**Signs observed by teammates, parents and coaches include:**

- | |
|---|
| <ul style="list-style-type: none"> • Appears dazed • Vacant facial expression • Confused about assignment • Forgets plays • Is unsure of game, score, or opponent • Moves clumsily or displays poor coordination • Answers questions slowly • Slurred speech • Shows behavior or personality changes • Can't recall events prior to hit • Can't recall events after hit • Seizures or convulsions • Any change in typical behavior or personality • Loses consciousness |
|---|

MUST RETURN TO COACH (COACH KEEP WITH YOU AT ALL TIMES)

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

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

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. You should also inform your child's coach if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to: <http://www.cdc.gov/ConcussionInYouthSports/>

Student-athlete Name Printed

Student-athlete Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date

Ohio Department of Health Concussion Information Sheet

For Interscholastic Athletics

Dear Parent/Guardian and Athletes,

This information sheet is provided to assist you and your child in recognizing the signs and symptoms of a concussion. Every athlete is different and responds to a brain injury differently, so seek medical attention if you suspect your child has a concussion. Once a concussion occurs, it is very important your athlete return to normal activities slowly, so he/she does not do more damage to his/her brain.

What is a Concussion?

A concussion is an injury to the brain that may be caused by a blow, bump, or jolt to the head. Concussions may also happen after a fall or hit that jars the brain. A blow elsewhere on the body can cause a concussion even if an athlete does not hit his/her head directly. Concussions can range from mild to severe, and athletes can get a concussion even if they are wearing a helmet.

Signs and Symptoms of a Concussion

Athletes do not have to be "knocked out" to have a concussion. In fact, less than 1 out of 10 concussions result in loss of consciousness. Concussion symptoms can develop right away or up to 48 hours after the injury. Ignoring any signs or symptoms of a concussion puts your child's health at risk!

Signs Observed by Parents of Guardians

- ♦ *Appears dazed or stunned.*
- ♦ *Is confused about assignment or position.*
- ♦ *Forgets plays.*
- ♦ *Is unsure of game, score or opponent.*
- ♦ *Moves clumsily.*
- ♦ *Answers questions slowly.*
- ♦ *Losses consciousness (even briefly).*
- ♦ *Shows behavior or personality changes (irritability, sadness, nervousness, feeling more emotional).*
- ♦ *Can't recall events before or after hit or fall.*

Symptoms Reported by Athlete

- ♦ *Any headache or "pressure" in head. (How badly it hurts does not matter.)*
- ♦ *Nausea or vomiting.*
- ♦ *Balance problems or dizziness.*
- ♦ *Double or blurry vision.*
- ♦ *Sensitivity to light and/or noise*
- ♦ *Feeling sluggish, hazy, foggy or groggy.*
- ♦ *Concentration or memory problems.*
- ♦ *Confusion.*
- ♦ *Does not "feel right."*
- ♦ *Trouble falling asleep.*
- ♦ *Sleeping more or less than usual.*

Be Honest

Encourage your athlete to be honest with you, his/her coach and your health care provider about his/her symptoms. Many young athletes get caught up in the moment and/or feel pressured to return to sports before they are ready. It is better to miss one game than the entire season... or risk permanent damage!

Seek Medical Attention Right Away

Seeking medical attention is an important first step if you suspect or are told your child has a concussion. A qualified health care professional will be able to determine how serious the concussion is and when it is safe for your child to return to sports and other daily activities.

- ♦ *No athlete should return to activity on the same day he/she gets a concussion.*
- ♦ *Athletes should **NEVER** return to practices/games if they still have ANY symptoms.*
- ♦ *Parents and coaches should never pressure any athlete to return to play.*

The Dangers of Returning Too Soon

Returning to play too early may cause Second Impact Syndrome (SIS) or Post-Concussion Syndrome (PCS). SIS occurs when a second blow to the head happens before an athlete has completely recovered from a concussion. This second impact causes the brain to swell, possibly resulting in brain damage, paralysis, and even death. PCS can occur after a second impact. PCS can result in permanent, long-term concussion symptoms. The risk of SIS and PCS is the reason why no athlete should be allowed to participate in any physical activity before they are cleared by a qualified health care professional.

Recovery

A concussion can affect school, work, and sports. Along with coaches and teachers, the school nurse, athletic trainer, employer, and other school administrators should be aware of the athlete's injury and their roles in helping the child recover.

During the recovery time after a concussion, physical and mental rest are required. A concussion upsets the way the brain normally works and causes it to work longer and harder to complete even simple tasks. Activities that require concentration and focus may make symptoms worse and cause the brain to heal slower. Studies show that children's brains take several weeks to heal following a concussion.



MUST READ

Returning to Daily Activities

1. Be sure your child gets plenty of rest and enough sleep at night – no late nights. Keep the same bedtime weekdays and weekends.
2. Encourage daytime naps or rest breaks when your child feels tired or worn-out.
3. Limit your child's activities that require a lot of thinking or concentration (including social activities, homework, video games, texting, computer, driving, job-related activities, movies, parties). These activities can slow the brain's recovery.
4. Limit your child's physical activity, especially those activities where another injury or blow to the head may occur.
5. Have your qualified health care professional check your child's symptoms at different times to help guide recovery.

Returning to School

1. Your athlete may need to initially return to school on a limited basis, for example for only half-days, at first. This should be done under the supervision of a qualified health care professional.
2. Inform teacher(s), school counselor or administrator(s) about the injury and symptoms. School personnel should be instructed to watch for:
 - a. Increased problems paying attention.
 - b. Increased problems remembering or learning new information.
 - c. Longer time needed to complete tasks or assignments.
 - d. Greater irritability and decreased ability to cope with stress.
 - e. Symptoms worsen (headache, tiredness) when doing schoolwork.
3. Be sure your child takes multiple breaks during study time and watch for worsening of symptoms.
4. If your child is still having concussion symptoms, he/she may need extra help with school-related activities. As the symptoms decrease during recovery, the extra help or supports can be removed gradually.

Resources

ODH Violence and Injury Prevention Program
www.healthyohiprogram.org/vipp/injury.aspx

Centers for Disease Control and Prevention
www.cdc.gov/Concussion

National Federation of State High School Associations
www.nfhs.org

Brain Injury Association of America
www.biausa.org/

Returning to Play

1. Returning to play is specific for each person, depending on the sport. Starting 4/26/13, Ohio law requires written permission from a health care provider before an athlete can return to play. Follow instructions and guidance provided by a health care professional. It is important that you, your child and your child's coach follow these instructions carefully.
2. Your child should NEVER return to play if he/she still has ANY symptoms. (Be sure that your child does not have any symptoms at rest and while doing any physical activity and/or activities that require a lot of thinking or concentration).
3. Be sure that the athletic trainer, coach and physical education teacher are aware of your child's injury and symptoms.
4. Your athlete should complete a step-by-step exercise-based progression, under the direction of a qualified healthcare professional.
5. A sample activity progression is listed below. Generally, each step should take no less than 24 hours so that your child's full recovery would take about one week once they have no symptoms at rest and with moderate exercise.*

Sample Activity Progression*

Step 1: Low levels of non-contact physical activity, provided NO SYMPTOMS return during or after activity. (Examples: walking, light jogging, and easy stationary biking for 20-30 minutes).

Step 2: Moderate, non-contact physical activity, provided NO SYMPTOMS return during or after activity. (Examples: moderate jogging, brief sprint running, moderate stationary biking, light calisthenics, and sport-specific drills without contact or collisions for 30-45 minutes).

Step 3: Heavy, non-contact physical activity, provided NO SYMPTOMS return during or after activity. (Examples: extensive sprint running, high intensity stationary biking, resistance exercise with machines and free weights, more intense non-contact sports specific drills, agility training and jumping drills for 45-60 minutes).

Step 4: Full contact in controlled practice or scrimmage.

Step 5: Full contact in game play.

*If any symptoms occur, the athlete should drop back to the previous step and try to progress again after a 24 hour rest period.



Ohio Department of Health
Violence and Injury Prevention Program
246 North High Street, 8th Floor
Columbus, OH 43215
(614) 466-2144

www.healthyohiprogram.org/concussion

MUST RETURN TO COACH (COACH KEEP WITH YOU AT ALL TIMES)

Ohio Department of Health Concussion Information Sheet

For Interscholastic Athletics

Acknowledgement of Having Received the "Ohio Department of Health's Concussion and Head Injury Information Sheet"

By signing this form, as the parent/guardian/care-giver of the student-athlete named below, I acknowledge receiving a copy of the concussion and head injury information sheet prepared by the Ohio Department of Health as required by section 3313.539 of the Revised Code.

I understand concussions and other head injuries have serious and possibly long-lasting effects.

By reading the information sheet, I understand I have a responsibility to report any signs or symptoms of a concussion or head injury to coaches, administrators and my student-athlete's doctor.

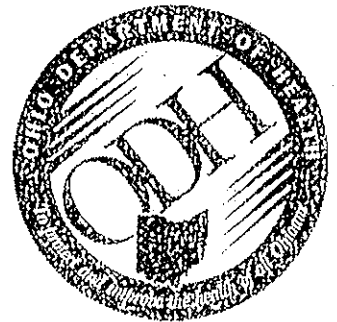
I also understand that coaches, referees and other officials have a responsibility to protect the health of the student-athletes and may prohibit my student-athlete from further participation in athletic programs until my student-athlete has been cleared to return by a physician or other appropriate health care professional.

Athlete

Date

Parent/Guardian

Date



Only needed if you still need physical



Ohio High School Athletic Association



PREPARTICIPATION PHYSICAL EVALUATION March 2013-June 2014

Page 1 of 6

HISTORY FORM

(Note: This form is to be filled out by the student and parent prior to seeing the medical examiner. The medical examiner should keep this form in the chart.)

Date of Exam _____
Name _____ Date of birth _____
Sex _____ Age _____ Grade _____ School _____ Sport(s) _____
Address _____
Emergency Contact: _____ Relationship _____
Phone (H) _____ (W) _____ (Cell) _____ (Email) _____

Medicines and Allergies: Please list the prescription and over-the-counter medicines and supplements (herbal and nutritional-including energy drinks/ protein supplements) that you are currently taking

Do you have any allergies? ☐ Yes ☐ No If yes, please identify specific allergy below.

☐ Medicines ☐ Pollens ☐ Food ☐ Stinging Insects

Explain "Yes" answers below. Circle questions you don't know the answers to.

GENERAL QUESTIONS		Yes	No
1. Has a doctor ever denied or restricted your participation in sports for any reason?			
2. Do you have any ongoing medical conditions? If so, please identify below: Asthma Anemia Diabetes Infections Other: _____			
3. Have you ever spent the night in the hospital?			
4. Have you ever had surgery?			
HEART HEALTH QUESTIONS ABOUT YOU		Yes	No
5. Have you ever passed out or nearly passed out DURING or AFTER exercise?			
6. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?			
7. Does your heart ever race or skip beats (irregular beats) during exercise?			
8. Has a doctor ever told you that you have heart problems? If so, check all that apply: <input type="checkbox"/> High blood pressure <input type="checkbox"/> A heart murmur <input type="checkbox"/> High cholesterol <input type="checkbox"/> A heart infection <input type="checkbox"/> Kawasaki disease Other: _____			
9. Has a doctor ever ordered a test for your heart? (For example, ECG/EKG, echocardiogram)			
10. Do you get lightheaded or feel more short of breath than expected during exercise?			
11. Have you ever had an unexplained seizure?			
12. Do you get more tired or short of breath more quickly than your friends during exercise?			
HEART HEALTH QUESTIONS ABOUT YOUR FAMILY		Yes	No
13. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 50 (including drowning, unexplained car accident, or sudden infant death syndrome)?			
14. Does anyone in your family have hypertrophic cardiomyopathy, Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia?			
15. Does anyone in your family have a heart problem, pacemaker, or implanted defibrillator?			
16. Has anyone in your family had unexplained fainting, unexplained seizures, or near drowning?			
BONE AND JOINT QUESTIONS		Yes	No
17. Have you ever had an injury to a bone, muscle, ligament, or tendon that caused you to miss a practice or game?			
18. Have you ever had any broken or fractured bones or dislocated joints?			
19. Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast, or crutches?			
20. Have you ever had a stress fracture?			
21. Have you ever been told that you have or have you had an x-ray for neck instability or atlantoaxial instability? (Down syndrome or dwarfism)			

BONE AND JOINT QUESTIONS - CONTINUED		Yes	No
22. Do you regularly use a brace, orthotics, or other assistive device?			
23. Do you have a bone, muscle, or joint injury that bothers you?			
24. Do any of your joints become painful, swollen, feel warm, or look red?			
25. Do you have any history of juvenile arthritis or connective tissue disease?			

MEDICAL QUESTIONS		Yes	No
26. Do you cough, wheeze, or have difficulty breathing during or after exercise?			
27. Have you ever used an inhaler or taken asthma medicine?			
28. Is there anyone in your family who has asthma?			
29. Were you born without or are you missing a kidney, an eye, a testicle (males), your spleen, or any other organ?			
30. Do you have groin pain or a painful bulge or hernia in the groin area?			
31. Have you had infectious mononucleosis (mono) within the past month?			
32. Do you have any rashes, pressure sores, or other skin problems?			
33. Have you had a herpes (cold sores) or MRSA (staph) skin infection?			
34. Have you ever had a head injury or concussion?			
35. Have you ever had a hit or blow to the head that caused confusion, prolonged headaches, or memory problems?			
36. Do you have a history of seizure disorder or epilepsy?			
37. Do you have headaches with exercise?			
38. Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling?			
39. Have you ever been unable to move your arms or legs after being hit or falling?			
40. Have you ever become ill while exercising in the heat?			
41. Do you get frequent muscle cramps when exercising?			
42. Do you or someone in your family have sickle cell trait or disease?			
43. Have you had any problems with your eyes or vision?			
44. Have you had an eye injury?			
45. Do you wear glasses or contact lenses?			
46. Do you wear protective eyewear, such as goggles or a face shield?			
47. Do you worry about your weight?			
48. Are you trying to gain or lose weight? Has anyone recommended that you do?			
49. Are you on a special diet or do you avoid certain types of foods?			
50. Have you ever had an eating disorder?			
51. Do you have any concerns that you would like to discuss with a doctor?			
FEMALES ONLY			
52. Have you ever had a menstrual period?			
53. How old were you when you had your first menstrual period?			
54. How many periods have you had in the last 12 months?			

Explain "yes" answers here

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct.

Signature of Student _____ Signature of parent/guardian _____ Date: _____

The student has family insurance ☐ Yes ☐ No If yes, family insurance company name and policy number: _____

Only needed if you still need physical



Ohio High School Athletic Association



PREPARTICIPATION PHYSICAL EVALUATION March 2013-June 2014

Page 2 of 6

THE ATHLETE WITH SPECIAL NEEDS - SUPPLEMENTAL HISTORY FORM

PLEASE COMPLETE ONLY IF YOUR STUDENT HAS SPECIAL NEEDS OR A DISABILITY.

Date of Exam _____
Name _____ Date of birth _____
Sex _____ Age _____ Grade _____ School _____ Sport(s) _____

1. Type of disability		
2. Date of disability		
3. Classification (if available)		
4. Cause of disability (birth, disease, accident/trauma, other)		
5. List the sports you are interested in playing		
	Yes	No
6. Do you regularly use a brace, assistive device or prosthetic?		
7. Do you use a special brace or assistive device for sports?		
8. Do you have any rashes, pressure sores, or any other skin problems?		
9. Do you have a hearing loss? Do you use a hearing aid?		
10. Do you have a visual impairment?		
11. Do you have any special devices for bowel or bladder function?		
12. Do you have burning or discomfort when urinating?		
13. Have you had autonomic dysreflexia?		
14. Have you ever been diagnosed with a heat related (hyperthermia) or cold-related (hypothermia) illness?		
15. Do you have muscle spasticity?		
16. Do you have frequent seizures that cannot be controlled by medication?		

Explain "yes" answers here

Please indicate if you have ever had any of the following.

	Yes	No
Atlantoaxial instability		
X-ray evaluation for atlantoaxial instability		
Dislocated joints (more than one)		
Easy bleeding		
Enlarged spleen		
Hepatitis		
Osteopenia or osteoporosis		
Difficulty controlling bowel		
Difficulty controlling bladder		
Numbness or tingling in arms or hands		
Numbness or tingling in legs or feet		
Weakness in arms or hands		
Weakness in legs or feet		
Recent change in coordination		
Recent change in ability to walk		
Spina bifida		
Latex allergy		

Explain "yes" answers here

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct.

Signature of Student _____ Signature of parent/guardian _____ Date: _____

Only needed if you still need physical



Ohio High School Athletic Association



PREPARTICIPATION PHYSICAL EVALUATION March 2013-June 2014

Page 3 of 6

PHYSICAL EXAMINATION FORM

Name _____ Date of birth _____

PHYSICIAN REMINDERS

- Consider additional questions on more sensitive issues.
 - Do you feel stressed out or under a lot of pressure?
 - Do you ever feel sad, hopeless, depressed or anxious?
 - Do you feel safe at your home or residence?
 - Have you ever tried cigarettes, chewing tobacco, snuff, or dip?
 - During the past 30 days, did you use chewing tobacco, snuff, or dip?
 - Do you drink alcohol or use any other drugs?
 - Have you ever taken anabolic steroids or used any other performance supplement?
 - Have you ever taken any supplements to help you gain or lose weight or improve your performance?
 - Do you wear a seat belt, use a helmet or use condoms?
 - Do you consume energy drinks?
- Consider reviewing questions on cardiovascular symptoms (questions 5-14).

EXAMINATION			
Height	Weight	<input type="checkbox"/> Male	<input type="checkbox"/> Female
BP	Pulse	Vision R 20/	L20/
		Corrected	<input type="checkbox"/> Y <input type="checkbox"/> N
MEDICAL		NORMAL	ABNORMAL FINDINGS
Appearance Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, arm span > height, hyperlaxity, myopia, MVP, aortic insufficiency)			
Eyes/ears/nose/throat Pupils equal Hearing			
Lymph nodes			
Heart Murmurs (auscultation standing, supine, +/- Valsalva) Location of the point of maximal impulse (PMI)			
Pulses Simultaneous femoral and radial pulses			
Lungs			
Abdomen			
Genitourinary (males only)			
Skin HSV, lesions suggestive of MRSA, tinea corporis			
Neurologic			
MUSCULOSKELETAL			
Neck			
Back			
Shoulder/arm			
Elbow/forearm			
Wrist/hand/fingers			
Hip/thigh			
Knee			
Leg/ankle			
Foot/toes			
Functional Duck walk, single leg hop			

*Consider ECG, echocardiogram, or referral to cardiology for abnormal cardiac history or exam.

*Consider GU exam if in private setting. Having third part present is recommended.

*Consider cognitive or baseline neuropsychiatric testing if a history of significant concussion.

PREPARTICIPATION PHYSICAL EVALUATION March 2013-June 2014

Page 4 of 6

CLEARANCE FORM

Note: Authorization forms (pages 5 and 6) must be signed by both the parent/guardian and the student.

Name _____ Sex ☐ M ☐ F Age _____ Date of birth _____

- ☐ Cleared for all sports without restriction
- ☐ Cleared for all sports without restriction with recommendations for further evaluation or treatment for

- ☐ Not Cleared
- ☐ Pending further evaluation
- ☐ For any sports
- ☐ For certain sports _____
- Reason _____

Recommendations _____

I have examined the above-named student and completed the preparticipation physical evaluation. The student does not present apparent clinical contraindications to practice and participate in the sport(s) as outlined above. A copy of the physical exam is on record in my office and can be made available to the school at the request of the parents. In the event that the examination is conducted en masse at the school, the school administrator shall retain a copy of the PPE. If conditions arise after the student has been cleared for participation, the physician may rescind the clearance until the problem is resolved and the potential consequences are completely explained to the athlete (and parents/guardians).

Name of physician or medical examiner (print/type) _____ Date of Exam _____
Address _____ Phone _____

Signature of physician/medical examiner _____, MD, DO, D.C., P.A. or A.N.P.

EMERGENCY INFORMATION

Personal Physician _____ Phone _____

In case of Emergency, contact _____ Phone _____

Allergies

Other Information _____

**THE STUDENT SHALL NOT BE CLEARED TO PARTICIPATE IN INTERSCHOLASTIC ATHLETICS
UNTIL THIS FORM HAS BEEN SIGNED AND RETURNED TO THE SCHOOL**



OHSA AUTHORIZATION FORM 2013-2014

I hereby authorize the release and disclosure of the personal health information of _____ ("Student"), as described below, to _____ ("School").

The information described below may be released to the School principal or assistant principal, athletic director, coach, athletic trainer, physical education teacher, school nurse or other member of the School's administrative staff as necessary to evaluate the Student's eligibility to participate in school sponsored activities, including but not limited to interscholastic sports programs, physical education classes or other classroom activities.

Personal health information of the Student which may be released and disclosed includes records of physical examinations performed to determine the Student's eligibility to participate in school sponsored activities, including but not limited to the Pre-participation Evaluation form or other similar document required by the School prior to determining eligibility of the Student to participate in classroom or other School sponsored activities; records of the evaluation, diagnosis and treatment of injuries which the Student incurred while engaging in school sponsored activities, including but not limited to practice sessions, training and competition; and other records as necessary to determine the Student's physical fitness to participate in school sponsored activities.

The personal health information described above may be released or disclosed to the School by the Student's personal physician or physicians; a physician or other health care professional retained by the School to perform physical examinations to determine the Student's eligibility to participate in certain school sponsored activities or to provide treatment to students injured while participating in such activities, whether or not such physicians or other health care professionals are paid for their services or volunteer their time to the School; or any other EMT, hospital, physician or other health care professional who evaluates, diagnoses or treats an injury or other condition incurred by the student while participating in school sponsored activities.

I understand that the School has requested this authorization to release or disclose the personal health information described above to make certain decisions about the Student's health and ability to participate in certain school sponsored and classroom activities, and that the School is a not a health care provider or health plan covered by federal HIPAA privacy regulations, and the information described below may be redisclosed and may not continue to be protected by the federal HIPAA privacy regulations. I also understand that the School is covered under the federal regulations that govern the privacy of educational records, and that the personal health information disclosed under this authorization may be protected by those regulations.

I also understand that health care providers and health plans may not condition the provision of treatment or payment on the signing of this authorization; however, the Student's participation in certain school sponsored activities may be conditioned on the signing of this authorization.

I understand that I may revoke this authorization in writing at any time, except to the extent that action has been taken by a health care provider in reliance on this authorization, by sending a written revocation to the school principal (or designee) whose name and address appears below.

Name of Principal: MS: Mr. Hickman OR HS: Mr. King
School Address: 8660 Sheridan Road

* Please circle
your principal.

This authorization will expire when the student is no longer enrolled as a student at the school.

NOTE: IF THE STUDENT IS UNDER 18 YEARS OF AGE, THIS AUTHORIZATION MUST BE SIGNED BY A PARENT OR LEGAL GUARDIAN TO BE VALID. IF THE STUDENT IS 18 YEARS OF AGE OR OVER, THE STUDENT MUST SIGN THIS AUTHORIZATION PERSONALLY.

Student's Signature _____

Birth date of Student, including year _____

Name of Student's personal representative, if applicable _____

I am the Student's (check one): _____ Parent _____ Legal Guardian (documentation must be provided)

Signature of Student's personal representative, if applicable _____

Date _____

A copy of this signed form has been provided to the student or his/her personal representative

2013-2014 Ohio High School Athletic Association Eligibility and Authorization Statement

This document is to be signed by the participant from an OHSAA member school and by the participant's parent.

- ☐ I have read, understand and acknowledge receipt of the OHSAA Student Athlete Eligibility Guide which contains a summary of the eligibility rules of the Ohio High School Athletic Association. I understand that a copy of the *OHSAA Handbook* is on file with the principal and athletic administrator and that I may review it, in its entirety, if I so choose. All OHSAA bylaws and regulations from the *Handbook* are also posted on the OHSAA web site at www.ohsaa.org.
- ☐ I understand that an OHSAA member school must adhere to all rules and regulations that pertain to the interscholastic athletics programs that the school sponsors, but that local rules may be more stringent than OHSAA rules.
- ☐ I understand that participation in interscholastic athletics is a privilege not a right.

Student Code of Responsibility

- ☐ As a student athlete, I understand and accept the following responsibilities:
 - ☐ I will respect the rights and beliefs of others and will treat others with courtesy and consideration.
 - ☐ I will be fully responsible for my own actions and the consequences of my actions.
 - ☐ I will respect the property of others.
 - ☐ I will respect and obey the rules of my school and laws of my community, state and country.
 - ☐ I will show respect to those who are responsible for enforcing the rules of my school and the laws of my community, state and country.
 - ☐ I understand that a student whose character or conduct violates the school's Athletic Code or School Code of Responsibility is not in good standing and is ineligible for a period of time as determined by the principal.

Informed Consent – By its nature, participation in interscholastic athletics includes risk of injury and transmission of infectious disease such as HIV and Hepatitis B. Although serious injuries are not common and the risk of HIV transmission is almost nonexistent in supervised school athletic programs, it is impossible to eliminate all risk. Participants have a responsibility to help reduce that risk. Participants must obey all safety rules, report all physical and hygiene problems to their coaches, follow a proper conditioning program, and inspect their own equipment daily. **PARENTS, GUARDIANS OR STUDENTS WHO MAY NOT WISH TO ACCEPT RISK DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS FORM. STUDENTS MAY NOT PARTICIPATE IN AN OHSAA-SPONSORED SPORT WITHOUT THE STUDENT'S AND PARENT'S/GUARDIAN'S SIGNATURE.**

- ☐ I understand that in the case of injury or illness requiring treatment by medical personnel and transportation to a health care facility, that a reasonable attempt will be made to contact the parent or guardian in the case of the student-athlete being a minor, but that, if necessary, the student-athlete will be treated and transported via ambulance to the nearest hospital.
- ☐ I consent to medical treatment for the student following an injury or illness suffered during practice and/or a contest.
- ☐ To enable the OHSAA to determine whether the herein named student is eligible to participate in interscholastic athletics in an OHSAA member school I consent to the release to the OHSAA any and all portions of school record files, beginning with 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, academic work completed, grades received and attendance data.
- ☐ I consent to the OHSAA's use of the herein named student's name, likeness, and athletic-related information in reports of contests, promotional literature of the Association and other materials and releases related to interscholastic athletics.
- ☐ I understand that if I drop a class, take course work through Post Secondary Enrollment Option, Credit Flexibility or other educational options, this action could affect compliance with OHSAA academic standards and my eligibility.
- ☐ I understand all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. Further I understand that if my student is removed from a practice or competition due to a suspected concussion, he or she will be unable to return to participation that day. After that day written authorization from a physician (M.D. or D.O.) or an athletic trainer working under the supervision of a physician will be required in order for the student to return to participation.
- ☐ I have read and signed the Ohio Department of Health's Concussion Information Sheet and have retained a copy for myself.
- ☐ By signing this we acknowledge that we have read the above information and that we consent to the herein named student's participation.

***Must Be Signed Before Physical Examination**

Student's Signature	Birth date	Grade in School	Date
Parent's or Guardian's Signature			Date

Ohio High School Athletic Association

Eligibility Checklist

For High School Students (Updated 5/1/13)

Before you play, you must be eligible. Please review the following checklist with your parents. Unchecked boxes will likely mean you are **NOT** eligible. For questions, see your principal or athletic administrator.

- ☐ I am officially enrolled in an OHSAA member high school.
- ☐ I am enrolled in at least five one credit courses or the equivalent, each of which counts toward graduation.
- ☐ I received passing grades in at least five one credit courses or the equivalent, each of which count toward graduation, during my last grading period.
- ☐ I have at least one parent living in Ohio.
- ☐ I have not changed schools without a corresponding move by my parents or legal guardian or by qualifying for one of the exceptions to the OHSAA transfer regulation.
- ☐ If I have changed schools (transferred), I have followed up with my new school to ensure that all proper forms have been submitted to the OHSAA Office.
- ☐ I have not been enrolled in high school for more than eight semesters.
- ☐ I did not turn 19 before August 1, 2013.
- ☐ I have not received an award, equipment or prize valued at greater than \$200 per item.
- ☐ I am competing under my true name and have provided my school with my correct home address.
- ☐ I have not competed in a **mandatory** open gym/facility, conditioning or instructional program.
- ☐ I have not been coached or provided instruction by a school coach in a team sport other than during my sport season, during an instructional period approved by the OHSAA or for no more than 10 days between June 1 and July 31.
- ☐ I am not competing on a non-school team during my school team's season.
- ☐ I have not been recruited to attend this school.
- ☐ I am not using anabolic steroids or other performance-enhancing drugs.
- ☐ I have had a physical examination within the past year and it is on file at my school.
- ☐ My parents and I attended a preseason meeting at my school which the OHSAA requires to be held no later than two weeks after the beginning of each sports season. We viewed a video presentation prepared by the OHSAA to review key eligibility issues, healthy lifestyles and sporting behavior.
- ☐ My school also reviewed with my parents and me its concussion management protocol, we reviewed and signed the Ohio Department of Health's "Concussion Information Sheet" prior to participation and we reviewed a short presentation on concussions available at no cost at nfhslearn.com.
- ☐ My parents and I have signed the OHSAA Authorization Form and the OHSAA Eligibility and Authorization Statement and they are on file at my school.

Student Printed Name _____

Parent/Guardian Printed Name _____

Student Signature _____

Parent/Guardian Signature _____

Student Date _____

Parent/Guardian Date _____

NOTE: This form has been provided as a service to the OHSAA membership for schools to utilize with student-athletes and their parents/guardians. Use of this form is at the sole discretion of each member school.



MUST READ

SHERIDAN HIGH SCHOOL

8725 SHERIDAN ROAD N.W., THORNVILLE, OH 43076 PHONE: 740-743-1335

Chris King, Principal

Tyrone Davis, Assistant Principal

Lance Dupler, Athletic Director

Attention Athletes, Parents and Guardians

There has been much discussion concerning The NLSD Board Policy (Rule 13) in the Pre-season Athletic Packet concerning attendance at school for all assigned classes the morning following a mid-week contest.

The rule promotes academics over athletics. Simply stated, if an athlete chooses to make attendance choices based on athletics over academics, the suspension applies. The intent of the rule is not to punish an athlete for being sick. We do not want athletes at school who are sick. We do not want the athlete to attend homeroom and leave immediately after homeroom to avoid a game suspension. If the athlete is sick, stay home, but do not plan on practicing that day. Missing a practice and dealing with a coach's rules and expectations are enough. If the athlete misses the entire day of school because of sickness, he or she will not be suspended for the next contest.

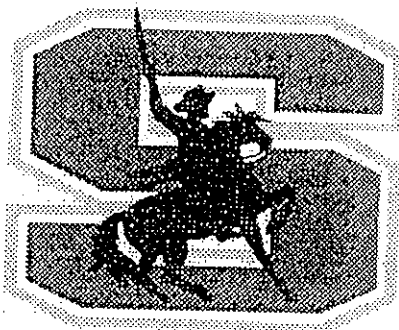
As before, when possible provide a doctor's excuse for any illness that requires medical attention.

Again, the rule promotes academics over athletics. The rule is intended to get the attention of the athletes that make a habit of missing or develop a pattern for missing the day after a mid-week contest. Those are the athletes that will be suspended.

Lance Dupler

Sheridan Athletic Director

RETURN TO ATHLETIC DIRECTOR



SHERIDAN ATHLETIC BOOSTER PARENT INFORMATION

Parent or Guardian: _____

Phone: _____

Address: _____

email: _____


Athlete's Name: _____

Sports participating in: _____

Involvement and participation in booster programs are becoming more critical to the welfare of high school athletic programs. Please take the time to provide information and plan on getting involved.

Please do this to benefit our Athletic Boosters



the community 
rewards

Sheridan Athletic Boosters

The last couple home football games Booster members have been collecting information on your Kroger cards. We have, however, run in to a small problem. Our intention was to conveniently register you. We will need an email to do so. If you still want us to take care of the first steps in registering please give us your email to go along with your Kroger Card Number.

If you would rather register yourself follow the steps below:

1. Have your Kroger Plus Card available. Go to www.krogercommunityrewards.com
2. Select Ohio. After clicking the Ohio button you will be directed to Enroll.
3. Click On Enroll
4. Click SIGN UP TODAY! It is located in the right column at the bottom.
5. Follow the directions to create an account with Kroger Rewards. Enter zip code, select the store you shop at most, enter an email address, create a password, and agree to the terms and conditions.
6. Check your email and click the link to verify your account.
7. Once you are re-directed to the Kroger site, click on MY ACCOUNT and log in with your email and password.
8. Go to EDIT KROGER COMMUNITY REWARDS and enter your Kroger Plus Number
9. Confirm that information
10. You can then enter the Athletic Booster # 80825 or search Sheridan High School. Once selected click on CONFIRM
11. You should see Sheridan High School Athletic Boosters on your screen as a chosen charity.

To get your Kroger Plus Number call 877-576-7587.

If you have given us your email please follow steps 6-11.

SportsMedicine Grant

Quick Reference for Comprehensive Sports Medicine Care

<u>Downtown</u>	<u>Dublin</u>	<u>Pickerington</u>
323 East Town Street	4351 Dale Drive	417 Hill Road North
Columbus, OH 43215	Dublin, OH 43017	Pickerington, OH 43147
614-461-8174	614-760-1660	614-834-1500
614-461-9155 fax	614-760-1665 fax	614-837-8592 fax
<u>Grove City</u>	<u>Lancaster</u>	<u>Westerville/Polaris</u>
2030 Stringtown Road	2036 South Shorway Dr.	300 Polaris Parkway

Ray Tesner, DO • Randy Wroble, MD • Rod Comisar, MD • Rob Fada, MD
Paul Degenova, DO • Gary Millard, DO • Amy Marcini, MD • Terry Philbin, DO

Saturday Morning Injury Clinic- 614-461-8174

Mid-August through Mid-November (Downtown Location Only!) 9:00 a.m.

No charge for physician examination

Other services such as x-rays, braces, casting, etc., will be billed to your insurance

D1 Sports Training / Therapy

SportsMedicine GRANT & Orthopedic Associates is proud of the partnership with D1 Sports Training & Therapy! D1 is a complete performance training facility with associated physical therapy available on site! Please call us today at 614-461-8174 for more information. You can also visit D1 on the web at www.D1SportsTraining.com, the place for the Athlete!

When your athletes need to see our physicians right away.....

Call (614) 461-8174 or (614) 325-2900 and ask to speak to Todd Sanders.

It is our priority that athletes will be seen as soon as possible.

For other information including maps, directions, services, etc.,

Please see our website at:

www.sportsmedicinegrant.com