

ABRAHAM LINCOLN MIDDLE SCHOOL

ATHLETIC ELIGIBILITY

NAME _____

Student ID # _____

Please Print : Last

First

Date _____ Grade _____ Date of Birth _____ Age _____ Sex M / F

Address _____ City _____ Zip _____ Phone _____ Cell _____

1. Is the home address above in the Abraham Lincoln attendance area? Circle one YES NO

If the answer is no, which high school attendance area do you live in? _____

2. Are you now, or have you ever been in the past year, on an interdistrict or intradistrict transfer to attend a school outside your attendance area? YES NO

3. Do you live with your parent(s) or a legal court approved guardian at the above address? YES NO

4. Have you lived at any other residence in the last year? YES NO

If the answer is yes, list previous address: _____

When did you move from the previous address? _____

If you have moved, check which of these situations applies to you:

- a. _____ My whole family moved from the old address to the new address.
- b. _____ I moved from living with one parent to living with another parent.
- c. _____ I moved from living with a parent to living with a relative or guardian.
- d. _____ I moved from a relative or guardian to living with a parent.
- e. _____ A court order placed me at my new address.

5. Have you attended any school other than a Selma school in the past year? YES NO

If the answer is yes, what is the name of the previous school? _____

If the answer is yes, when did you leave the previous school? _____

6. Are you changing schools because you were dismissed from your old school for disciplinary reasons? YES NO

7. Will you reach your 15th birthday before Sept. 1st of your 8th grade year? YES NO

ACKNOWLEDGEMENT OF KNOWLEDGE OF RULES

Athletes and Parents: Please take the time to read through the information in this packet. After reading the rules, please sign below as an acknowledgement that you have read and understood the policies, rules and procedures at Abraham Lincoln Middle School and agree to abide by them.

I understand that giving false information on this application to participate in athletics may result in the loss of athletic eligibility.

We have read and understood the material included in the "Warning of Risk", including the Football Helmet warning. I certify that I have read and understood the warning.

I understand that CIF BY-Law #306 requires an annual physical for participation in athletics and that the physical WILL NOT expire during the season of sport that the athlete is participating in.

We have read and agree to the policies stated in the Abraham Lincoln Middle School Code of Ethics and the CIF Pursuing Victory with Honor Code of Conduct regarding the conduct of athletes, and the parents/guardians of ALMS students participating in co-curricular activities. We agree that these rules are important in helping our students become good citizens with a high sense of moral integrity, a competitive spirit, and the ability to be honest and forthright in all endeavors. We agree to abide by these rules for co-curricular participation at ALMS. We acknowledge that a student may be disciplined or removed from a team for violation of any of the provisions of the codes or policies for co-curricular participation at ALMS. I also have read and understood the CIF "Ethics in Sports" Policy Statement, Code of Ethics and the Violations and Minimum Penalties of this policy. I agree to abide by the policy and related consequences while participating in interscholastic athletics, regardless of context, site or jurisdiction.

Signature of Student _____

Signature of Parent _____

PHYSICAL EXAMINATION

To be completed by physician

HT _____ WT _____ BP _____ UA _____ VISION _____
GENERAL _____ CHEST _____ HEART _____ ABDOMEN _____
GU/HERNIA _____ NECK/BACK _____ EXTREMITIES _____

LIMITATIONS: YES NO If "Yes", list limitations below in the Summary of Comments area.

SUMMARY OF COMMENTS: _____

I verify that _____ has been examined by me on _____ and
Name of student Date of examination
he/she is physically able to participate in interscholastic athletics.

PHYSICIAN'S NAME _____ PHYSICIAN'S SIGNATURE _____

HEALTH HISTORY

To be completed by Parent/Guardian (Answer "Yes" or "No" Only)

NAME _____ SEX: M / F AGE _____ BIRTHDATE _____

	Yes	No		Yes	No
1. Chronic/Recurrent Illness	_____	_____	11. Contacts or corrective lenses	_____	_____
2. Surgery other than tonsils	_____	_____	12. Asthma or wheezing	_____	_____
3. Injuries treated by physician	_____	_____	13. Chest pain	_____	_____
4. Under care of physician for current condition	_____	_____	14. Problems with blood	_____	_____
5. Currently taking medication	_____	_____	15. Problems with liver, spleen or kidneys	_____	_____
6. Organs missing	_____	_____	16. Hernia	_____	_____
7. Heat Exhaustion or heat stroke	_____	_____	17. Bone/Joint Injury	_____	_____
8. Dizziness, faint, convulsions, chronic headache	_____	_____	18. Allergy to medications	_____	_____
9. Knocked out or unconscious	_____	_____	19. Immunizations current	_____	_____
10. Diabetes	_____	_____	20. Tetanus Booster the last ten years	_____	_____

If you answered "Yes" to any above please explain: _____

ATHLETICS – WARNING OF RISK

SERIOUS, CATASTROPHIC AND PERHAPS FATAL INJURY MAY RESULT FROM ATHLETICS PARTICIPATION. By its very nature, competitive athletics may put students in situations in which accidents may occur. Many forms of athletic competition result in violent physical contact among players, the use of equipment that may result in accidents, strenuous physical exertion, and numerous other exposures to risk of injury. Students and parents must assess the risks involved in such participation and make their choice to participate in spite of those risks. No amount of instruction, precaution, or supervision will totally eliminate all risk of injury. Just as driving an automobile involves choice of risk, athletic participation by students also may be inherently dangerous. The obligation of parents and students in making this choice to participate cannot be overstated. There have been accidents resulting in serious permanent physical impairment as a result of athletic competition. Students will be instructed in proper techniques to be used in athletic competition and in proper utilization of all equipment worn or used in practice and competition. Students must adhere to that instruction and utilization and must refrain from improper uses and techniques. By granting permission for your student to participate in athletic competition, you, as a parent or guardian, acknowledge that such a risk exists. By choosing to participate in athletic competitions, you, the student, acknowledge that such a risk exists. **FOOTBALL PLAYERS: No helmet can prevent all head or neck injuries a player may receive while participating in football. DO NOT USE YOUR HELMET TO BUTT, RAM OR SPEAR AN OPPOSING PLAYER. This is in violation of the football rules and such use can result in severe head or neck injuries, paralysis or death to you and possible injury to your**

opponent. If any of the foregoing is not completely understood, please contact the Athletic Director at Abraham Lincoln Middle School for further information.

SELMA UNIFIED SCHOOL DISTRICT / ABRAHAM LINCOLN MIDDLE SCHOOL
SPORTS PERMISSION SLIP/WAIVER NOTICE/MEDICAL AUTHORIZATION
 GRADES 7 - 12

Student Name: _____ ID #: _____

I give permission for my child to participate in the following activity:

Activity: _____

Season (circle one): FALL WINTER SPRING

INSURANCE INFORMATION

In order to participate in any sporting activity, your child must have insurance protection.

- I have insurance for my child.
 Insurance Carrier: _____
 Policy Number: _____

AND/OR

- I will arrange to purchase student accident insurance.

PERMISSION TO TRANSPORT STUDENT

I hereby give permission for the District to transport my child to and from the sports activity, including practice and competition, as may be necessary. I understand the transportation may be by school bus, charter bus, school van or private vehicle.

MEDICAL AUTHORIZATION

In the event of a medical emergency and if I/we cannot be reached, I authorize the Selma Unified School District and its employees to consent to any medical treatment, examination, or tests necessary for the care of this child.

	Contact Persons	Daytime Phone Number	Nighttime Phone Number
1			
2			
3			

 Parent/Guardian Signature

 Date

**SELMA UNIFIED SCHOOL DISTRICT
VOLUNTARY ACTIVITIES PARTICIPATION
ACKNOWLEDGEMENT AND ASSUMPTION OF POTENTIAL RISK**

I authorize my son/daughter, _____ to participate in the District sponsored activity(ies) of _____.

- I understand and acknowledge that these activities have inherent risk of injury/illness to individuals who participate in such activities.
- I understand and acknowledge that participation in these activities is voluntary and is not required by the District.
- I understand and acknowledge that by participating in the activity(ies), I and my son/daughter are assuming responsibility for the inherent risks associated with participation in such activity(ies).
- I understand and acknowledge that the District, its employees, officers, or agents are not responsible for any injury/illness which results from a risk inherent to the activity(ies), and which is incident to and/or associated with preparing for and/or participating in the activity(ies).

I acknowledge that I have carefully read both sides of this VOLUNTARY ACTIVITIES PARTICIPATION form and that I understand its terms.

Student Name (Printed)

Student Signature

Date

Student ID #

Parent/Guardian Signature

Date

NOTE:

A signed VOLUNTARY ACTIVITIES PARTICIPATION form must be on file with the District before a student will be allowed to participate in the above extra-curricular activities.

9/04:ba

FINANCIAL RESPONSIBILITY

Each student and parent will be held responsible for any school property that has been issued or checked out to him/her. It is also the responsibility of the student and his/her parents/guardians to have all personal property clearly marked as to be identified.

The school is NOT responsible for any lost or stolen property that has been issued or checked out to the athlete no matter as to where the loss or theft may take place.

Athletic equipment/school property that could be issued (but is not limited to): practice jerseys, game jerseys, shorts, tennis racquets, equipment bags, belts, socks, practice pants, game pants, shoulder pads, knee pads, thigh pads, girdle pad sets, football helmet, wrestling singlets, and headgear. This could include but is not limited to the following sports: cross country, tennis, football, volleyball, soccer, wrestling, basketball, swimming, baseball, softball, and track.

The athlete and parent agree to maintain and return the equipment in good condition when the sport ends or at earlier request. The athlete will report any loss or theft of equipment immediately. Said equipment is to be used only for school-related purposes.

Decisions made by school officials regarding this Activities Code may be appealed to the Athletic Director, Assistant Principal, and Principal.

We understand the ALMS Extra-Curricular and Activities Code applies to student behavior at all times during the specified activity season. We realize the Extra-Curricular and Activities Code is supplemental to the Discipline Code and is also in effect when school is NOT in session or the activity is not in progress.

Student Name (Printed)

Student Signature

Date

Student ID #

Parent/Guardian Signature

Date

ABRAHAM LINCOLN MIDDLE SCHOOL

EXTRA-CURRICULAR AND ACTIVITIES CODE

The staff of ALMS recognizes the need to generate the code of conduct for those students involved in the privilege of representing ALMS in school sponsored activities. The code is aimed primarily at helping the student by providing guidelines and rules of conduct. The parent and student shall indicate their understanding of the code and the penalties for violations by signing this document and returning it to the athletic department/advisor.

SCHOLASTIC ELIGIBILITY

In order to be eligible for participation in extra/co-curricular activities a student must pass at least 25 units during the previous grading period with a 2.0 GPA ("C" average). At the end of the current grading period, any student who has not met the eligibility criteria set forth above shall be placed on Academic Probation for the subsequent grading period. Any student who has not met the eligibility criteria for two consecutive grading periods will not be eligible to participate.

RULES OF CONDUCT

A student involved in extra/co-curricular activities must understand that these rules are supplemental to the District Discipline Code.

1. Students shall not use or possess alcohol, drugs, or tobacco at any time.
2. Students who commit theft, assault, vandalism, or felony as determined by school officials, will be declared ineligible.
First Infraction: Any student violating rules 1 or 2 will be removed from all extracurricular/co-curricular activities for the rest of the season/term or 45 school days, whichever is longer. The advisor Coach and Activity/Athletic Director shall hold a parent conference prior to suspending the student from an activity.
Second Infraction: Any student violating rules 1 or 2 for a second time will be suspended from all activities for 365 calendar days from the time of the violation.
3. Students shall attend school for at least (4) periods in order to practice or play/perform. If a performance/game is conducted on a Saturday or holiday, the student shall attend school for at least four periods the day before the event. Students are responsible for clearing their absence with the Principal/Athletic Director. A student who is suspended OFF CAMPUS is counted as absent under this rule. If a student is suspended they cannot be at any extracurricular practice or contest unless excused by the principal or designee. The student will be placed on a ten day non-privilege list. IE: no participation in any extracurricular activities unless excused by the principal or designee. The student is also responsible for informing the coach/advisor if he/she has been absent for all or part of the day.
First Infraction: If it has been determined by school officials that a student has been absent from school and subsequently participated in a practice/performance/game without the proper permission, the student will be suspended for the next full game/performance.
Second Infraction: If it has been determined by school officials that a student has been absent from school for a second time and subsequently participated in a practice/performance/game without the proper permission, the student shall be removed from the team/activity.
4. Any student who quits or is released from an activity once the team has been chosen, will forfeit all awards and recognition for that activity and will be suspended from all extra/co-curricular activities for 30 school days. In sports, the athlete will not be allowed to participate in the next season of sports.
5. A student who becomes academically ineligible will forfeit all awards and recognition from the activity at the time of ineligibility.
6. Students are subject to consequences for violation of any school conduct/behavior rules, which are broken during any extra/co-curricular activity.

We understand the ALMS Extra-Curricular and Activities Code applies to student behavior at all times during the specified activity season. We realize the Extra-Curricular and Activities Code is supplemental to the Discipline Code and is also in effect when school is NOT in session or the activity is not in progress.

Student Name (Printed)

Student Signature

Date

Student ID #

Parent/Guardian Signature

Date

CENTRAL VALLEY ATHLETIC LEAGUE

CHARACTER DEVELOPMENT GUIDELINES FOR PLAYERS

Everything you say and do should be consistent with the six core ethical values comprising good character: trustworthiness, respect, responsibility, fairness, caring and citizenship.

Trustworthiness

1. Act so people can trust you.
2. Be completely honest. Tell the truth, the whole truth, and nothing but the truth. Don't be sneaky or tricky. Don't do things behind people's back. Don't cheat or steal.
3. Don't do anything you think is wrong. Have integrity. Stand up for your beliefs. Be your best self. Show commitment and courage.
4. Keep your promises. Do what you said you will do when you said you would do it. Return what you borrow.
5. Don't spread rumors or gossip that will hurt others. Stand by your family, friends and your team but don't do anything wrong to get or keep a friendship. Don't ask a friend to do something wrong.

Respect

6. Treat opponents, teammates, referees, and others with respect and courtesy. Do not use insults, negative cheers or name-calling to put anyone down. Don't yell at or make fun of any person. Be polite.
7. Be positive. Help people get better, be constructive.
8. Be on time. Remember others are relying on you.
9. Treat all people as individuals. Be tolerant of people's differences. Never make statements out of prejudice.
10. Listen to others. Respect their opinions and their right to have a different opinion than yours.
11. Don't use violence to settle disputes. Don't hit, shove, or threaten to hurt anyone.

Responsibility

12. Think before you act. Think about consequences, how your actions today can affect you and others in the future.
13. Take responsibility for the consequences of your choices. Don't blame others for what you did or take credit that doesn't belong to you.
14. Set a good example in everything you do.
15. Do your best. Don't quit. Make all you do worthy of Pride. Remember, your character is shown by how you play the game, not by whether you win or lose.
16. Always control yourself. Do not lose your temper. Don't throw things, scream, hit others, or use bad language.
17. Do your duty. Do what you should do even when it is hard or you don't want to.
18. Be a good sport. Win and lose with grace -- don't brag when you win or complain and make excuses when you lose.

Fairness

19. Play fair and With Honor. Play by the rules. Never cheat.
20. Give everyone a fair chance.

Caring

21. Be kind and caring. Treat others the way you want to be treated. Don't be mean, cruel, or uncaring of others' feelings.
22. Think of the team. Think of others. Don't be selfish on the field or off it.

Citizenship

23. Obey laws and rules. Remember it is unfair for some people to play by the rules While others don't.
24. Listen to your coaches, referees, and your parents. Respect authority.
25. Do your share. Help your team and your community. Protect the environment.

Any request made by school administration/athletic director will be followed and could result in the removal from the event.

SIGNATURE: By signing below, I am agreeing to follow the guidelines as stated above while participating in any type of activity in the CENTRAL VALLEY ATHLETIC LEAGUE

Student Name (Printed)

Student Signature

Date

Student ID #

Parent/Guardian Signature

Date

IT IS A PRIVILEGE, NOT A RIGHT, TO REPRESENT YOUR SCHOOL IN AN ACTIVITY OR SPORT.

CENTRAL VALLEY ATHLETIC LEAGUE

CHARACTER DEVELOPMENT GUIDELINES FOR PARENTS

A primary goal of sports is to build character while teaching the fundamentals of the game. The CHARACTER COUNTS! project promotes six core ethical values: trustworthiness, respect, responsibility, fairness, caring and good citizenship. Parental involvement and cooperation is essential to the success of the program. While attending practices or games: Help maintain a positive environment for the development of character.

Trustworthiness

1. Always act so as to encourage and justify trust. Teach your children the meaning and importance of trustworthiness.
2. Be honest and demand honesty from your children. Do not engage in or permit dishonesty by lying, deception or omission.
3. Teach and model the importance of integrity by doing the right thing even when the cost is high. Admit your mistakes openly and honestly as a demonstration of integrity.
4. Keep commitments. Do what you say you will do when you say you would do it to impress on your children the values of promise-keeping and reliability. If you are unable to keep a commitment, apologize to those who were depending on you.

Respect

5. Treat everyone, including your children, with respect, courtesy, and consideration and require your children to treat others with similar respect. Cheer good plays of both teams. Avoid and prevent put-downs, insults, name-calling, yelling and other verbal or nonverbal conduct likely to offend, hurt or simply set a bad example. Promote politeness and use of "please", "thank you", and "excuse me".
6. Let the coach's coach; immediately following a game, allow the coach time to do so. Do not impede their team meeting following a game/match. Give them time to meet with the team. Any questions, comments or concerns can wait until their team time is over. Please allow for the consideration that the coach may not have the luxury of meeting with you that day.
7. Let the coaches coach, the referees ref, and the players play. Cheer and encourage vigorously but do not confuse players or impede coaches by shouting instructions to players from the sidelines. Do not challenge the calls of a referee during or after a game.
8. Teach your children to be on time and that others are depending on them to be where they should be when they should be.
9. Teach your children to treat others as individuals recognizing and appreciating their diversity in skills, gender, ethnicity and race. Never permit statements or acts of prejudice.
10. Listen to your children. Respect their opinions and answer their questions without being defensive or arbitrary.
11. Abraham Lincoln Middle school has a closed practice policy. Any questions, comments, or concerns can be scheduled after practice. Do not interfere with a coach's judgment on substitutions, plays or assigned position. **Playing time is earned and not guaranteed at this level of competition and is non-negotiable.**

Responsibility

12. Always exercise and demand self-control. Do not lose your temper. Don't throw things, scream, or otherwise demonstrate uncontrolled anger toward any player, including your child, a coach or referee.
13. Teach and model self-discipline and a sense of duty to meet obligations even when is difficult or unpleasant.
14. Teach and model the idea of pursuing excellence measured by doing one's best, not by winning. Teach your children to win and lose with grace, that character is measured by how you played the game and that they can always hold their heads up high when they have done their best.
15. Teach and model accountability by accepting responsibility for your choices of both action and inaction.

Fairness

16. Teach and model fair play. Make sure your child understands the importance of playing honorably.
17. Teach and model fair-mindedness by being fair and by being open to ideas, suggestions and opinions of others.

Caring

18. Teach and model kindness and compassion for others. Discourage selfishness. In your relations with players, coaches, referees and other parents treat others the way you would want to be treated.
19. Help to ensure that your child's athletic experience is one of fun and enjoyment. Correct and instruct in constructive ways. Be generous with your praise when it is deserved. Tell all players when they have done something well. Cheer both teams at half-time and at the end of the game to demonstrate appreciation for the effort of the players.
20. Demonstrate sincere interest in your child's play and support the team.

Citizenship

21. Teach and model the importance of obeying laws and rules as an obligation of citizenship. Teach how unfair it is for some people to play by the rules while others don't.
22. Teach and model respect for the environment and the obligation to contribute to the greater good.

Any request made by school administration/athletic director will be followed and could result in the removal from the event.

SIGNATURE: By signing below, I am agreeing to follow the guidelines as stated above while my child _____
participates in any type of activity in the CENTRAL VALLEY ATHLETIC LEAGUE (print student name)

Parent(s) _____ Date _____

Parent(s) _____ Date _____

IT IS A PRIVILEGE, NOT A RIGHT, TO REPRESENT YOUR SCHOOL IN AN ACTIVITY OR SPORT.



CIF Concussion Information Sheet



Why am I getting this information sheet?

You are receiving this information sheet about concussions because of California state law AB 25 (effective January 1, 2012), now Education Code § 49475:

1. *The law requires a student-athlete who may have a concussion during a practice or game to be removed from the activity for the remainder of the day.*
2. *Any student-athlete removed for this reason must receive a written note from a physician trained in the management of concussion before returning to practice.*
3. *Before a student-athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the school by the student-athlete and the parent or guardian.*

Every 2 years all coaches are required to receive training about concussions (AB 1451), as well as certification in First Aid training, CPR, and AEDs (life-saving electrical devices that can be used during CPR).

What is a concussion and how would I recognize one?

A concussion is a kind of brain injury. It can be caused by a bump or hit to the head, or by a blow to another part of the body with the force that shakes the head. Concussions can appear in any sport, and can look differently in each person.

Most concussions get better with rest and over 90% of athletes fully recover. However, all concussions should be considered serious. If not recognized and managed the right way, they may result in problems including brain damage and even death.

Most concussions occur without being knocked out. Signs and symptoms of concussion (see back of this page) may show up right after the injury or can take hours to appear. If your child reports any symptoms of concussion or if you notice some symptoms and signs, seek medical evaluation from your team's athletic trainer and a physician trained in the evaluation and management of concussion. If your child is vomiting, has a severe headache, or is having difficulty staying awake or answering simple questions, call 911 for immediate transport to the emergency department of your local hospital.

On the CIF website is a **Graded Concussion Symptom Checklist**. If your child fills this out after having had a concussion, it helps the physician, athletic trainer or coach understand how they are feeling and hopefully will show improvement over time. You may have your child fill out the checklist at the start of the season even before a concussion has occurred so that we can understand if some symptoms such as headache might be a part of their everyday life. We call this a "baseline" so that we know what symptoms are normal and common for your child. Keep a copy for your records, and turn in the original. If a concussion occurs, your child can fill out this checklist again. This Graded Symptom Checklist provides a list of symptoms to compare over time to follow your child's recovery from the concussion.

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

Athletes with the signs and symptoms of concussion should be removed from play immediately. There is NO same day return to play for a youth with a suspected concussion. Youth athletes may take more time to recover from concussion and are more prone to long-term serious problems from a concussion.

Even though a traditional brain scan (e.g., MRI or CT) may be "normal", the brain has still been injured. Animal and human research studies show that a second blow before the brain has recovered can result in serious damage to the brain. If your athlete suffers another concussion before completely recovering from the first one, this can lead to prolonged recovery (weeks to months), or even to severe brain swelling (Second Impact Syndrome) with devastating consequences.

There is an increasing concern that head impact exposure and recurrent concussions may contribute to long-term neurological problems. One goal of concussion education is to prevent a too early return to play so that serious brain damage can be prevented.



CIF Concussion Information Sheet



Signs observed by teammates, parents and coaches include:

- | | |
|--|--|
| <ul style="list-style-type: none"> • Looks dizzy • Looks spaced out • Confused about plays • Forgets plays • Is unsure of game, score, or opponent • Moves clumsily or awkwardly • Answers questions slowly | <ul style="list-style-type: none"> • Slurred speech • Shows a change in personality or way of acting • Can't recall events before or after the injury • Seizures or "has a fit" • Any change in typical behavior or personality • Passes out |
|--|--|

Symptoms may include one or more of the following:

- | | |
|--|---|
| <ul style="list-style-type: none"> • Headaches • "Pressure in head" • Nausea or throws up • Neck pain • Has trouble standing or walking • Blurred, double, or fuzzy vision • Bothered by light or noise • Feeling sluggish or slowed down • Feeling foggy or groggy • Drowsiness • Change in sleep patterns | <ul style="list-style-type: none"> • Loss of memory • "Don't feel right" • Tired or low energy • Sadness • Nervousness or feeling on edge • Irritability • More emotional • Confused • Concentration or memory problems • Repeating the same question/comment |
|--|---|

What is Return to Learn?

Following a concussion, students may have difficulties with short- and long-term memory, concentration and organization. They will require rest while recovering from injury (e.g., avoid or limit reading, texting, video games, loud movies), or may even need to limit school attendance for a few days. As they return to school, the schedule might need to start with a few classes or a half-day. If recovery from a concussion is taking longer than expected, they may also benefit from a reduced class schedule and/or limited homework; a formal school assessment may also be necessary. Your school or physician can help suggest and make these changes. Students should complete the Return to Learn guidelines and return to complete school before beginning Return to Play, unless your physician makes other recommendations. Go to the CIF website (cifstate.org) for more information on Return to Learn.

How is Return to Play (RTP) determined?

Concussion symptoms should be completely gone before **returning to competition**. A RTP progression is a gradual, step-wise increase in physical effort, sports-specific activities and then finally unrestricted activities. If symptoms occur with activity, the progression should be stopped. If there are no symptoms the next day, exercise can be restarted at the previous stage.

RTP after concussion should occur only with medical clearance from a physician trained in the evaluation and management of concussions, and a step-wise progression program monitored by an athletic trainer, coach, or other identified school administrator. Please see cifstate.org for a graduated return to play plan. [AB 2127, a California state law effective 1/1/15, states that return to play (i.e., full competition) must be **no sooner** than 7 days after the concussion diagnosis has been made by a physician.]

Final Thoughts for Parents and Guardians:

It is well known that students will often not talk about signs of concussions, which is why this information sheet is so important to review with them. Teach your child to tell the coaching staff if they experience such symptoms, or if they suspect that a teammate has had a concussion. You should also feel comfortable talking to the coaches or athletic trainer about possible concussion signs and symptoms that you may be seeing in your child.

References:

- American Medical Society for Sports Medicine position statement: concussion in sport (2013)
- Consensus statement on concussion in sport: the 5th International Conference on Concussion in Sport held in Berlin, October 2016
- <http://www.cdc.gov/concussion/HeadsUp/youth.html>



CIF Concussion Information Sheet



School: _____

You are receiving this information sheet about concussions because of California state law AB 25 (effective January 1, 2012), now Education Code § 49475:

1. *The law requires a student-athlete who may have a concussion during a practice or game to be removed from the activity for the remainder of the day.*
2. *Any student-athlete removed for this reason must receive a written note from a medical doctor trained in the management of concussion before returning to practice.*
3. *Before a student-athlete can start the season and begin practice in a sport, a concussion information sheet must be signed and returned to the school by the student-athlete and the parent or guardian.*

Every 2 years all coaches are required to receive training about concussions (AB 1451), as well as certification in First Aid training, CPR, and AEDs (life-saving electrical devices that can be used during CPR).

For current and up-to-date information on concussions you can visit:
<http://www.cdc.gov/concussion/HeadsUp/youth.html>

I acknowledge that I have received and read the CIF Concussion Information Sheet.

Student-Athlete Name
Printed

Student-Athlete
Signature

Date

Parent or Legal Guardian Name
Printed

Parent or Legal Guardian
Signature

Date

CVAL CODE OF ETHICS

(ATHLETES, PARENTS, SPECTATORS, COACHES, STAFF)

1. To display acceptable standards of behavior and citizenship at school and in the community.
2. To cooperate in a mature, sportsmanlike manner in all events whether it be as a participant or spectator.
3. To show respect for other participants, supervisors, coaches and officials.
4. To comply with the Board of Education policies, District Regulations, and the State Education Code.
5. To comply with the rules and regulations established by the appropriate governing bodies of their activity.
6. To eliminate all possibilities which tend to destroy the best values of the game.
7. To achieve a thorough understanding and acceptance of the rules of the game and the standards of eligibility.
8. To encourage leadership, use of initiative and good judgment by the players on a team.
9. To recognize that the purpose of athletics to promote the physical, mental, moral, social and emotional well-being of the individual players.
10. To understand that the use of intoxicants, tobacco, drugs, or substances for sale or possession of them will not be tolerated.
11. To understand that the use of Steroids or Dietary Supplements will not be tolerated. If parent suspects the use of either substance they may refer to or , also the Athletic Department has a CD available for viewing. The Athletic Director or Counselors are available for information.
12. Athlete must not be a member of any outside club that participates in the same sport in the same season.
13. Athlete must carry an accident insurance policy (either their own or one available at the school).
14. Athlete must maintain a grade point average of 2.0.
15. All concerned must remember that an athletic contest is only a game, not a matter of life and death for player, coach, school, official, spectator or nation.

ENFORCEMENT

1. Athletes who fail to comply with the code of ethics will be declared ineligible to participate in school activities by the school administration.
2. Parents/Spectators who fail to comply with the above code of ethics will be banned from one game to the entire season. The Administration has the right to enforce any penalties deemed necessary to provide safe and consistent environment for Savelle student-athletes.
3. Students/Parents/Spectators may seek a hearing before an appeal review panel consisting of the athletic director, vice principal, and principal.

READ OR POST AT ANY CVAL SPONSORED SPORTS EVENT:

Welcome to Abraham Lincoln Middle School and our contest today. Sportsmanship and citizenship are stressed here at Abraham Lincoln Middle School. To that end, we ask that all student-athletes, the coaches and our fans abide by the following rules during today's contest:

- Only positive reinforcement of your team is allowed cheer them on!
- No profanity allowed!
- Only players, coaches and referees are allowed by the benches.
- Any requests made by school administration athletic director will be followed and could result in removal from the event

Student Name (Printed)

Student Signature

Date

Student ID #

Parent/Guardian Signature

Date

Keep Their Heart in the Game

Sudden Cardiac Arrest Information for Athletes & Parents/Guardians

What is sudden cardiac arrest? Sudden cardiac arrest (SCA) is when the heart stops beating, suddenly and unexpectedly. When this happens blood stops flowing to the brain and other vital organs. SCA is NOT a heart attack. A heart attack 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 victim to collapse. The malfunction is caused by a congenital or genetic defect in the heart's structure.

How common is sudden cardiac arrest in the United States?

As the leading cause of death in the U.S., there are more than 300,000 cardiac arrests outside hospitals each year, with nine out of 10 resulting in death. Thousands of sudden cardiac arrests occur among youth each year, as it is the #1 killer of student athletes and the leading cause of death on school campuses.

Who is at risk for sudden cardiac arrest?

SCA is more likely to occur during exercise or physical activity, so student-athletes are at greater risk. While a heart condition may have no warning signs, studies show that many young people do have symptoms but neglect to tell an adult. This may be because they are embarrassed, they do not want to jeopardize their playing time, they mistakenly think they're out of shape and need to train harder, or they simply ignore the symptoms, assuming they will "just go away." Additionally, some health history factors increase the risk of SCA.

What should you do if your student-athlete is experiencing symptoms?

We need to let student-athletes know that if they experience any SCA-related symptoms it is crucial to alert an adult and get follow-up care as soon as possible with a physician, surgeon, nurse practitioner or physician assistant. If the athlete has any of the SCA risk factors, these should also be discussed with a doctor to determine if further testing is needed. Wait for your doctor's feedback before returning to play, and alert your coach, trainer and school nurse about any diagnosed conditions.

**FAINTING
is the
#1 SYMPTOM
OF A HEART CONDITION**

Recognize the Signs & Risk Factors

Tell Your Coach and Consult Your Doctor if These Conditions are Present in Your Student-Athlete

Potential Indicators That SCA May Occur

- Fainting or seizure, especially during or right after exercise
- Fainting repeatedly or with excitement or startle
- Excessive shortness of breath during exercise
- Racing or fluttering heart palpitations or irregular heartbeat
- Repeated dizziness or lightheadedness
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise

Factors That Increase the Risk of SCA

- Family history of known heart abnormalities or sudden death before age 50
- Specific family history of Long QT Syndrome, Brugada Syndrome, Hypertrophic Cardiomyopathy, or Arrhythmogenic Right Ventricular Dysplasia (ARVD)
- Family members with unexplained fainting, seizures, drowning or near drowning or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs, such as cocaine, inhalants, "recreational" drugs, excessive energy drinks, diet pills or performance-enhancing supplements

Cardiac Chain of Survival

On average it takes EMS teams up to 12 minutes to arrive to a cardiac emergency. Every minute delayed in attending to a sudden cardiac arrest victim decreases the chance of survival by 10%. Everyone should be prepared to take action in the first minutes of collapse.

Recognition of Sudden Cardiac Arrest



Victim is collapsed, unresponsive and not breathing, even if gasping, gurgling, exhibiting breathing noises or seizure-like activity.

Call 9-1-1



Follow emergency dispatcher's instructions. Call any on-site Emergency Responders.

Hands-Only CPR



Begin CPR immediately. Hands-only CPR involves fast and continual two-inch chest compressions—about 100 per minute.

Defibrillation



Immediately retrieve and use an automated external defibrillator to restore the heart to its normal rhythm. Follow step-by-step audio instructions from the AED.

Advanced Care



Designate a bystander to direct EMS to the victim for quick transfer to the hospital.

Cardiac Chain of Survival Courtesy of Parent Heart Watch

Keep Their Heart in the Game

Sudden Cardiac Arrest Information
for Athletes & Parents/Guardians

What is an AED?



An automated external defibrillator (AED) is the only way to save a sudden cardiac arrest victim. An AED is a portable, user-friendly device that automatically diagnoses potentially life-threatening heart rhythms and delivers an electric shock to restore normal rhythm. Anyone can operate an AED, regardless of training. Simple audio direction instructs the rescuer when to press a button to deliver the shock, while other AEDs provide an automatic shock if a fatal heart rhythm is detected. A rescuer cannot accidentally hurt a victim with an AED—quick action can only help. AEDs are designed to only shock victims whose hearts need to be restored to a healthy rhythm. Check with your school for locations of on-campus AEDs.

What are we doing to help protect student athletes?

The State of California passed the Eric Paredes Sudden Cardiac Arrest Prevention Act in 2016 to protect K-12 students participating in school-sponsored athletic activities. New policy adds sudden cardiac arrest (SCA) training to coach certification, and new protocol that empowers coaches to remove from play a student-athlete who exhibits fainting—the number one warning sign of a potential heart condition, and potentially for other conditions if they are believed to be cardiac related. A student-athlete who has been removed from play after displaying signs or symptoms associated with SCA may not return to play until he or she is evaluated and cleared by a licensed health care provider. Parents, guardians, caregivers and adults involved in athletic activities are urged to dialogue with student-athletes about potential warning signs and risk factors and be familiar with the cardiac chain of survival so they are prepared in the event of a cardiac emergency.

I have reviewed and understand the symptoms and warning signs of SCA and the new protocol to incorporate SCA prevention strategies into my/my student's sports program or activity.

STUDENT-ATHLETE SIGNATURE

PRINT STUDENT-ATHLETE'S NAME

DATE

PARENT/GUARDIAN SIGNATURE

PRINT PARENT/GUARDIAN'S NAME

DATE

For more information about Sudden Cardiac Arrest visit

California Department
of Education
cde.ca.gov

Eric Paredes Save
A Life Foundation
epsavealife.org

California Interscholastic
Federation (CIF)
cifstate.org

National Federation of High Schools Free
20-Min. Training Video For Coaches, Parents or
Anyone Involved in Student Sports Activities
nfhslearn.com/courses/61032

