



# Enterprise Elementary School District Athletic Forms Packet



## Includes

- Student athlete and parent/guardian guidelines
- Agreement for team participation
- Student accident insurance/health insurance
- Non-sponsored transportation acknowledgment
- Signature page (to be returned to coach)

*\*Concussion advisement and sudden cardiac arrest information (located in district handbook)*

**Students must have already filled out the sports tryout permission slip available in school office or website**

## **STUDENT ATHLETE GUIDELINES**

**Enterprise Elementary School District (EESD)** recognizes the importance of athletics as an integral component of a student's complete educational development. We believe that all students should have an opportunity to participate in some form of interscholastic athletics and that such participation should encourage positive scholastic and social growth and achievement. All participants and teams will represent the school and community in a positive manner and will reflect the dedication and hard work that will be required to compete and be successful. Success will not be measured by records that are achieved by teams or individuals, but rather by the knowledge that each participant gave his/her best effort and prepared for each contest to the best of his/her ability. EESD recognizes that an effective athletic program is the product of responsible cooperation among the student-athlete, the coaching staff, the parents, and the administration.

### ***SPORTSMANSHIP***

Participation in the athletic program requires adherence to the highest standards of good sportsmanship. Aspects of good sportsmanship include ensuring fairness in competition and exhibiting respect for the people and institutions associated with athletic contests. Participation in school sports programs is a privilege, not a right. To earn that privilege, student-athletes must abide by the rules and they must conduct themselves, on and off the court/field, as positive role models who exemplify good character. Student athletes will be held responsible for their actions in all areas where their school and team is represented, on the court and in the classroom.

### ***GENERAL BEHAVIOR***

Behavior at contests, functions, practices, or while on any school campus is subject to all school rules. Profanity, unsportsmanlike conduct, throwing of equipment or any similar displays of disrespect to any person or institution will not be tolerated. Athletes accept responsibility for their actions both on and off the court/field. Defiant behavior and back-talk toward any coach, school official, or game official will also not be tolerated. Students who quit during the season or are removed for behavioral reasons may not be eligible to participate in the subsequent season sport without administrator approval.

**Violations of the school's behavioral expectations may result in benching, the suspension or termination of the participation privilege and is within the sole discretion of the school administration.**

## ***EQUIPMENT***

The Enterprise School District provides money to purchase and maintain proper equipment. Equipment is to be handled properly for financial reasons as well as to teach students responsibility.

1. All equipment/uniforms will be inventoried, numbered, and checked out by coaches.
2. Students are responsible for the security of their equipment and uniforms. In some cases, particularly with game uniforms, the replacement fee may be higher than the original purchase price because special processing and printing may be required to duplicate the uniform.
3. Students are expected to turn in the same piece(s) of equipment checked out to them.
4. Equipment should be returned in the same condition as it was received. Equipment and uniforms should be cleaned and washed before being returned. Students are expected to make arrangements to have torn or ripped clothing repaired prior to turning it in to the coach.
5. All equipment must be returned within one week of the last game.
6. Students must return or pay for all equipment before they can practice or participate in another sport.
7. Students who leave a team prior to the end of the season must turn in their equipment and uniform within one week.

## **PARENT/GUARDIAN GUIDELINES**

The role of the parent in the education of a student is crucial. The support shown in the home is often manifested in the ability of the student to accept the opportunities presented at school and in life.

At EESD we believe that the principles and value systems taught at home will echo at school and in the realm of athletic competition. We expect parents to help nurture an atmosphere of good sportsmanship. Respect, responsibility, compassion, and integrity are lifetime values taught through athletics. These are the principles of good sportsmanship and character. With them, the spirit of competition thrives, fueled by honest rivalry, courteous relations and graceful acceptance of the results.

As a parent/guardian of a student-athlete at our school, your goals should include:

1. Promote a healthy lifestyle;
2. Realize that athletics are part of the educational experience, and the benefits of involvement go beyond the final score of a game;

3. Encourage our students to perform their best, just as we would urge them on with their class work;
  - . Participate in positive cheers that encourage our student-athletes; discourage any cheers that would redirect that focus – including those that taunt and intimidate opponents, their fans and officials;
  - . Learn, understand, and respect the rules of the game, the officials who administer them and their decisions;
  - . Respect the task that our coaches face as teachers; and support them as they strive to educate our youth. Please do not approach a coach following a game if you need to discuss his/her decisions and or strategies. Wait until the following school day at a more appropriate time to discuss your concerns.
  - . In grades 6-8, there is no rule regarding playing time. Playing time is at the sole discretion of the coach. Though our coaches care about developing each individual athlete and their skills, he/she will almost always make a decision based upon what is best for the TEAM and not individuals in game situations.
  - . Respect our opponents as student-athletes, and acknowledge them for striving to do their best; and
  - . Develop a sense of dignity and civility under all circumstances.

You can have a major influence on your student's attitude about academics and athletics. The leadership role you take will help influence on your child, and our community, for years to come.

**Violation of the above parent/guardian guidelines could result in one or more of the following: a warning, removal from the venue, suspension, or further discipline to be decided by the administration.**

## **JR. HIGH ONLY**

### ***SCHOOL/TEAM ATTENDANCE***

Attending all classes is a high priority for all student-athletes. Students must attend 50% (minimum) of the school day, excluding lunch, in order to participate in practice or games that day (doctor's appointments excluded). An athlete must be present at all practices and games except for illness and family emergencies. Each athlete is personally responsible for notifying his or her coach prior to an absence whenever possible. Coaches will provide athletes with their contact information. An unexcused absence from practice or a game may result in a limitation or suspension of playing time. A pattern of unexcused absences from practices and/or games will ultimately result in the athlete's removal from the team.

### ***ACADEMIC ELIGIBILITY***

All student-athletes who wish to participate in an athletic activity at EESD *must* meet the following requirements:

1. Maintain a minimum "C" average (2.0 GPA) with no "F's" in their overall academic program for the progress report period prior to their participation and for each succeeding progress report period during participation.
  - a. Athletic grade checks will be conducted every three weeks during a trimester. Grade checks will be completed on Monday and eligibility issues will be reported to the coaches immediately following with the prohibition period beginning that Thursday and remaining in place until cleared.
  - b. If a student athlete becomes ineligible they will be allowed to practice but not play in any games or dress down.
  - c. If a student athlete is put on prohibition twice in the same sports season, they will be removed from the team.
2. Meet standards of satisfactory citizenship (responsibility).
3. Have a satisfactory attendance record as defined by board policy.

## AGREEMENT FOR TEAM PARTICIPATION

[Including Waivers and Releases of Potential Claims]

### **This Agreement must be read and the Signature Page must be signed for student participation.**

In consideration of the Student's ability to participate on a Team [including any Sport, Cheerleading or Dance], including try-outs, practices, pre-season or seasonal strength or training sessions or training camps, or actual participation in Team events, shows, performances, or competitions, or the traveling to or from any of these activities ("Team Activities"), the Student and Parent/Legal Guardian ("Adult") signing this Agreement agree as follows:

It is a privilege, not a right, to participate in extracurricular activities, including Team Activities. The privilege may be revoked at any time, for any reason that does not violate Federal or State law or District policies or procedures. There is no guarantee that the Student will make a Team, remain on a Team, or actively participate in Team events, shows, performances, or competitions. Such matters shall remain exclusively within the judgment and discretion of the supervising District employee or volunteer coach.

The Student and the Adult understand the nature of the Team, including the inherent or potential risks of Team Activities. The Student is in sufficiently good health and physical condition to participate in Team Activities, and voluntarily wishes to participate in Team Activities. Before participating in any Team Activity, a Concussion Head Injury Advisement and Sudden Cardiac Arrest Acknowledgment shall be signed and submitted to the school office (valid for one academic year, Fall/Winter/Spring Activities).

The Student shall comply with the instruction and directions of Team Activity teachers, coaches, supervisors, chaperones, and instructors. During the Student's participation in Team Activities, as well as academic and/or other school activities, the Student shall comply with all applicable Codes of Conduct. The Student shall also generally conduct himself/herself at all times in keeping with the highest moral and ethical standards so as to reflect positively on himself/herself, the Team and the District. Failure to meet these obligations may, in the discretion of the District, result in removal from the Team and/or Team Activities. Should the Student's violation of these obligations result in bodily injury or property damage, the Adult agrees to (a) pay to restore or replace the damaged property, (b) pay for bodily injury damages to an individual, and (c) defend, protect and hold the District harmless from such claims.

Team Activities contain potential risks of harm or injury, including harm or injury that may lead to permanent or serious physical injury to the Student, including paralysis, brain injury, or death ("Injuries"). Injuries might arise from the Student's actions or inactions, the actions or inactions of another Student or participant in a Team Activity, or the actual or alleged failure by District employees, agents or volunteers to adequately coach, train, instruct, or supervise Team Activities. Injuries might also arise from an actual or alleged failure to properly maintain, use, repair, or replace physical facilities or equipment available for Team Activities. Injuries might also arise from undiagnosed, improperly diagnosed, untreated, improperly treated, or untimely treated actual or potential physical conditions or Injuries, whether or not caused by or related to the Student's participation in Team Activities. All such risks are deemed to be inherent to the Student's participation in Team Activities. To the fullest extent allowed by law, the Student and Adult therefore also fully assume all such risks and waive and release any potential future claim they might otherwise have been able to assert against the District and any Board Member, employee, agent, or volunteer of the District ("Released Parties"), including any claim that could otherwise have been made on behalf of the Student or any parent, administrator, executor, trustee, guardian, assignee or family member. The Student and Adult further understand that Team Activities and transportation to and/or from Team Activities are "field trips" for which there is immunity from liability pursuant to Education Code Section 35330.

If the Student believes that an unsafe condition or circumstance exists, or otherwise feels or believes that continued participation in a Team Activity might present a risk of Injury, the Student will immediately discontinue further participation in the Team Activity, notify School personnel of the Student's belief, and notify a parent or guardian of the Student's belief. The parent or guardian shall thereafter prevent the Student from participating in the Team Activity until the unsafe condition or circumstance is addressed or remedied to their satisfaction. Emergency medical information regarding the Student is on file with the District and is current. The Adult agrees to provide updated medical information during the course of the Student's participation in Team Activities. If an injury or medical emergency occurs during Team Activities, District employees, agents or volunteers have my express permission to administer or to authorize the administration of urgent or emergency care, including the transportation of the Student to an urgent care or emergency care provider. In such circumstances, notice to me and/or the Emergency Contact of the injury or medical emergency may be delayed. Therefore, any urgent or emergency care provider has my express authority to conduct diagnostic or anesthetic procedures, and/or to provide medical care or treatment (including surgery), as they may deem reasonable or necessary under all existing circumstances. All costs and expenses associated with such care are solely my responsibility. An Adult can only withhold this authorization by filing an Objection to Medical Care (Education 49407) that is based on their personally held religious beliefs.

Education Code Section 32221.5 requires us to notify you that: Under state law, school districts are required to ensure that all members of school athletic teams have accidental injury insurance that covers medical and hospital expenses. This insurance requirement can be met by the school district offering insurance or other health benefits that cover medical and hospital expenses. Some pupils may qualify to enroll in no-cost or low-cost local, state, or federally sponsored health insurance programs. Information about these programs may be obtained by calling the District. Education Code Section 32221 requires that such insurance cover medical and hospital expenses resulting from bodily injuries in one of the following amounts: (a) a group or individual medical plan with accident benefits of at least \$200 for each occurrence and major medical coverage of at least \$10,000, with no more than \$100 deductible and no less than 80% payable for each occurrence; (b) group or individual medical plans which are certified by the Insurance Commissioner to be equivalent to the required coverage of at least \$1,500; or (c) at least \$1,500 for all such medical and hospital expenses. You may meet this obligation in one of two ways:

Option 1: Private medical insurance/or Medical. The Adult agrees that the Student is covered, and will remain covered during the length of the Team season and that coverage exists in the amounts required by Section 32221.

Option 2: Purchase insurance meeting the requirements of Section 32221, for the period during which the Student is participating on the Team, through a coverage provider made available through the District [please contact the District to gain additional information regarding this program or see attached brochure]. If you are financially unable to pay for such, and if no other alternate funding is available through private or charitable organizations, the District will obtain financing for, or provide, the required coverage.

This Agreement is to be broadly construed to enforce the purposes and agreements set forth above, and shall not be construed against the Released Parties solely on the basis that this Agreement was drafted by the District. If any part of this Agreement is deemed invalid or ineffective, all other provisions shall remain in force. No oral modification of this Agreement, or alleged change or modification of its terms by subsequent conduct or oral statement, is allowed. This Agreement contains the sole and exclusive understanding of the parties, with no other representation relied upon by the Adult or Student in determining whether to execute this Agreement or in agreeing to participate in Team Activities.



# ENTERPRISE ELEMENTARY SCHOOL DISTRICT

1155 Mistletoe Lane, Redding, CA 96002 • Phone: (530) 224-4100 • FAX: (530) 224-4101 • www.eesd.net

*Empowering every child, every day to create a better world*

## STUDENT ACCIDENT INSURANCE / HEALTH INSURANCE 2024-2025 School Year

## SEGURO ESTUDIANTIL CONTRA ACCIDENTES / SEGURO DE SALUD Año escolar 2024-2025

Dear Parents:

Estimados padres:

The Enterprise Elementary School District **does not provide medical, accident or dental insurance** for pupils injured on school premises or through school activities. In accordance with Education Code Section 49472, the District is making available a low cost medical/dental accident insurance program, and we urge that serious consideration be given to these programs.

El Distrito Escolar Primario de Enterprise **no provee seguro médico o dental en caso de accidentes** para alumnos lesionados en las instalaciones escolares o en actividades de la escuela. Para ayudarles a proveer cobertura para su estudiante, el distrito tiene un programa de seguro de accidente médico/dental disponible a bajo costo, es urgente que usted considere seriamente este programa.

**Accident Only Plans:** The purpose of these plans is to provide assistance at a minimum cost to meet some of the expenses for accidental injury. The plans pay the first \$500.00 in benefits in addition to other insurance, which can help you meet your primary insurance deductibles and/or co-payments.

### Planes solamente de Accidente

El propósito de este plan es el de proveer ayuda a un costo mínimo para cubrir algunos de los gastos por accidente o lesión. El plan no provee cobertura ilimitada, pero ofrece ayuda considerable en caso de accidente.

The plan costs are in the chart below. Please visit your Childs' School Office to obtain a detailed brochure/application, or you may obtain one and sign up online at [www.peinsurance.com](http://www.peinsurance.com) (click on Products, then Student Insurance). Please read the Student Benefits Plan Brochure to select the plan that best meets your needs.

El costo del plan se muestra a continuación. Por favor visite la oficina de la escuela de su hijo para obtener un folleto/solicitud detallado, o puede obtenerlo en Internet en el sitio web [www.peinsurance.com](http://www.peinsurance.com) (Seleccione en "Productos," (productos) después en "Student Insurance" ( Seguro de estudiante). Por favor lea el folleto de Plan de beneficios estudiantiles para elegir el plan que mejor cumpla con sus necesidades.

All Plans Are A ONE TIME ANNUAL Payment

Todos los Planes son UNA VEZ Pago ANUAL

Options	Low	High
At School Plan Grades P-8	\$ 11.00	\$ 25.00
Grades 9-12	\$ 24.00	\$ 54.00
24-Hr-a-Day Plan Grades P-8	\$ 75.00	\$161.00
Grades 9-12	\$ 92.00	\$192.00

Opciones	Baja	Alta
Plan para la Escuela Grados P-8	\$11.00	\$25.00
Grados 9-12	\$24.00	\$54.00
Plan 24-Hr al día Grados P-8	\$75.00	\$161.00
Grados 9-12	\$92.00	\$192.00

Please see brochure for complete plan details.

*Por favor, vea folleto para completar los detalles del plan*

**Health Insurance Plans** Pacific Educators can now assist people in applying for health insurance plans that meet the guidelines of the **Affordable Care Act** and help you avoid potential tax penalties. Some may **qualify for tax savings and government assistance**. We will be happy to help you get all the potential assistance/subsidies you are eligible for. Please call the number below or visit our website at [www.peinsurance.com](http://www.peinsurance.com) click 'products' and then 'health insurance.'

**Los planes de seguros de salud** Pacific Educators ahora pueden ayudar a las personas en la aplicación de los planes de seguros de salud que cumplan con las directrices de la Ley de Atención asequible y ayudarle a evitar posibles sanciones fiscales. Algunos podrán beneficiarse de los ahorros fiscales y asistencia del gobierno. Estaremos encantados de ayudarle a obtener todas las posibilidades de ayuda y las subvenciones que puede optar. Por favor, llame al número que aparece a continuación o visite nuestro sitio web en [www.peinsurance.com](http://www.peinsurance.com) haga clic en "productos" y luego "seguro de salud."

If you have further questions, please call Pacific Educators, Inc., at (800) 722-3365 or (714) 639-0962.

Si tiene preguntas, por favor llame a Pacific Educators, Inc., Student Accident Department al (800) 722-3365 o (714) 639-0962.

Heather Armelino  
Superintendent

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Superintendent



# Signature Page

## RETURN THIS PAGE ONLY

Please sign below and return this page only. All information must be filled in, including the insurance policy number. This page is due back to the coach by \_\_\_\_\_.

Today's Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Medical Insurance Provider: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### Non-Sponsored Transportation Acknowledgment

The undersigned hereby acknowledges and understands that the District is **NOT** providing transportation to school sponsored activities and that it is the responsibility of the undersigned to arrange for transportation and that the undersigned acknowledges that the driver is not driving on behalf of or as an agent of the District. It is fully my understanding that the District is in no way responsible, nor does the District assume liability for any injuries or losses resulting from the non-district sponsored transportation.

I acknowledge that I have carefully read the following and that I understand and agree to:

- Student athlete and parent/guardian guidelines
- Agreement for team participation
- Student accident insurance/health insurance
- Non-sponsored transportation acknowledgment
- Concussion advisement and sudden cardiac arrest information (located in district handbook)

Parent/guardian signature: \_\_\_\_\_

Student signature: \_\_\_\_\_