

Required Athletics Registration Safety and Conduct Documents

Parent Code of Conduct

I, the parent, represent Endeavor Charter School as a team member and therefore, have an obligation to uphold the following code of conduct. A break in this code of conduct will result in verbal or written warnings, possible removal from the competition or suspension from attending future competitions. The integrity and reputation of Endeavor Charter School and Pride Athletics are more important than the outcome of any competition.

I agree to...

1. Provide positive support, care and encouragement to my student athlete, team, coach and school.
2. Maintain a positive behavior and attitude at all athletic events and realize that observing athletic contests is a privilege.
3. Refrain from making derogatory comments to players, coaches, parents and game officials. Refrain from use of foul language and be respectful in all situations.
4. Not approach the coach before, during or after competition to discuss strategy, playing time or any other concern. All concerns will be approached in a respectful manner at an appropriate time via email, phone call or meeting no earlier than the following day. If the concern is not addressed to the parent's satisfaction, or addressed at all, the Athletic Director may then be contacted.
5. Not discuss another student athlete with the coach; the only player to be discussed is my own.
6. Not approach a game official before, during or after competition. Any officiating concerns will be brought to the Athletic Director's attention.
7. Not approach opposing coaches, players or parents before, during or after competition with concerns. Any concerns involving opponents will be brought to the Athletic Director's attention.
8. Be modest in victory, gracious in defeat and the example of what good sportsmanship is by recognizing, approving and applauding good team play and respecting the integrity of game officials.

Concussion Policy

Endeavor Charter School Concussion Policy

Enacted August 4, 2011

1. This policy is applicable to all Endeavor school activities and all activities sponsored by the Endeavor Pride, and is mandated by recently enacted North Carolina law.
2. A **concussion** is defined as an **alteration in mental state**, with or without loss of consciousness that occurs immediately after a head injury. Symptoms of concussion may include: **loss of consciousness, headache, nausea, vomiting, disorientation, visual changes, disorientation, or slowed cognition**. Long-term consequences of concussion can include cognitive impairment, mood changes, declining academic performance, and more severe brain injury.
3. If any significant symptoms listed above occur after a head injury, Endeavor staff and Pride coaches must exclude a child from all sports and physical activity until he/she is cleared for participation by a health care professional. Such clearance must be received in writing (preferred clearance form may be downloaded as part of a resource packet at: http://tbicenter.unc.edu/MAG_Center/qwlaw.html, but other physician notes are acceptable as long as adequate return to play guidelines are provided).
4. Students who show significant symptoms of concussion, which affect their ability to function in the classroom, should also be excluded from school until clearance from a health care professional is received.
5. **Any injury resulting in loss of consciousness, significant neck pain, significant changes in mental state, severe headache, or uncontrolled bleeding or vomiting should lead to a 911 call. A seriously injured child should not be moved. Pressure is the best way to control bleeding. If a child's neck hurts, it should be held in a stable, neutral position until EMS arrives.**
6. All student athletes, parents of student athletes, coaches and staff members involved in Endeavor-sponsored athletic events must provide written certification that they have reviewed and understood a designated concussion information sheet annually. This concussion information sheet is attached, but may be downloaded as part of a resource packet at: http://tbicenter.unc.edu/MAG_Center/qwlaw.html.

Endeavor Concussion Emergency Action Plan

1. Endeavor's athletic director and coaches shall be trained in concussion recognition and management, and shall certify their understanding through annual written verification.
2. All parents and student athletes shall review information on concussion recognition and management and shall certify their understanding through annual written verification.
3. Concussion recognition and immediate care of the child shall be the responsibility of the athletic director or of the most immediately available ECS staff member if a concussion occurs at ECS or during any ECS sponsored field trip.
4. Concussion recognition and immediate care of the child shall be the responsibility of the coach during any Endeavor Pride athletic event.
5. The ECS staff member or Endeavor Pride coach immediately responsible for the child shall designate a responsible adult to activate EMS (911) if signs of severe head injury are present. These may include loss of consciousness, significant neck pain, significant changes in mental state, severe headache, or uncontrolled bleeding or vomiting. The responsible ECS staff member or coach should not leave the injured child. The injured child should not be moved by non-medical personnel. Neck stabilization in a neutral position should be provided if significant neck pain is present.
6. For milder concussions, which do not require activation of EMS (911), the child should be removed from play, the child's parent or guardian should be notified, the child's mental state should be monitored for signs of deterioration, and the child should not be permitted to return to athletics the same day. The child should be excluded from sports until appropriate medical certification has been received.
7. A functioning cell phone must be carried by the responsible ECS staff member or coach when away from ECS school grounds on an ECS-sponsored or Endeavor Pride activity.
8. Critical medical information (chronic medical conditions, allergies, medications) and emergency contact information should be accessible to the responsible ECS staff member or coach at all times.

Common questions used to assess a child's cognitive function after a head injury:

- Symptoms: Does your head hurt (scale of 1-10, severity)? Does your neck hurt? Do you feel dizzy? Do you feel like throwing up? Can you see normally? Do you remember what happened?
- Cognitive Function: Can you tell me where you are? Can you tell me who I am? Can you tell me the date? What team are we playing? What's the score? Can you count backwards from 60 by 7's (60, 53, 46, etc.) or backwards from 22 by 3's? Name 3 unrelated objects (i.e., chair, flag, tree). Ask the student to repeat them, then ask them what the three objects were in several minutes.

Parent/Coach Concussion Statement Acknowledgement

I have read the *Concussion Information* above.

I should not allow any student-athlete exhibiting signs and symptoms consistent with concussion to return to play or practice on the same day. If you agree, please check.

I am aware and acknowledge the following information:

- A concussion is a brain injury.
- A concussion can affect a student-athlete's ability to perform everyday activities, their ability to think, their balance, and their classroom performance.
- I realize I cannot see a concussion, but I might notice some of the signs in a student-athlete right away. Other signs/symptoms can show-up hours or days after the injury.
- If I suspect a student-athlete has a concussion, I am responsible for removing them from activity and referring them to a medical professional trained in concussion management.
- Student-athletes need **written clearance from a medical professional** trained in concussion management to return to play or practice after a concussion.
- I will not allow any student-athlete to return to play or practice if I suspect that he/she has received a blow to the head or body that resulted in signs or symptoms consistent with concussion.
- Following concussion the brain needs time to heal. I understand that student-athletes are much more likely to sustain another concussion or more serious brain injury if they return to play or practice before symptoms resolve.
- In rare cases, repeat concussions can cause serious and long-lasting problems.
- I have read the signs/symptoms listed on the *Concussion Information* above.

ENDEAVOR CHARTER SCHOOL ATHLETICS

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

1. As a condition to my child's participation in the ENDEAVOR CHARTER SCHOOL ATHLETIC PROGRAMS ("Athletics") for the School Year 2025-2026, I hereby release, waive, discharge and covenant not to sue Endeavor Charter School and its respective members, servants, agents and employees, or the owners and operators of any sports facilities utilized for Athletics (the "Facilities") (hereafter collectively referred to as the "Released Parties"), jointly and severally, from any and all liability, claims, demands, causes of action, costs, fees, expenses and obligations of any kind arising out of or relating to any loss, damage or injury, including death, that may be sustained by my child or me, or to any property belonging to my child or me, whether caused by the negligence of the Released Parties or otherwise, while my child participates in Athletics, or while in, on, or at the Facilities, while in transit to or from the Facilities, or at any place or places connected with Athletics.

2. I am fully aware that there are risks and hazards connected with my child's participation in Athletics, including risks and hazards that may be unknown to me, and I hereby elect to allow my child to participate in Athletics, to enter the Facilities and engage in practices and games knowing that these activities involve a level of risk. I voluntarily assume full responsibility for any loss, property damage or personal injury, including death, that may be sustained by my child or me, or any loss or damage to property owned by me, as a result of allowing my child to participate in Athletics, whether caused by the negligence of the Released Parties or otherwise.

3. I further hereby agree to indemnify and hold harmless the Released Parties, jointly and severally, from any loss, liability, damage or costs, including but not limited to attorney's fees and any judgment, that the Released Parties may incur if my child or any other family member attempts to or does file a lawsuit against one or more of the Released Parties as a result of any personal injury or property damage or loss suffered as a result of my child's participation in Athletics.

4. In signing this release, I acknowledge and represent that:

- A. I have read the foregoing release, understand it, and sign it voluntarily as my own free act and deed;
- B. No oral representation, statements or inducements, apart from the foregoing written agreement, have been made; and
- C. I am at least eighteen (18) years of age and fully competent.

Certification of Health Insurance

Your child has indicated an interest in participating in a student activity that requires accident insurance coverage. Please fill out the following information, this form must be signed by a parent or guardian and returned to Endeavor Charter School to be held on record.

I hereby certify that the above named student is adequately covered by an accident and/or health and/or hospital insurance policy which is in effect during the present school year. This coverage is through an insurance policy identified below.

Consent for Medical Treatment & Medication Statement

Permission is hereby granted to the attending physician to proceed with any medical or surgical treatment for the above named student athlete. I understand that every effort will be made by the attending physician to contact me prior to treatment

Permission is also granted to Endeavor Charter School to provide any necessary minor or emergency treatment(s) to the above-named student prior to his/her admission to any medical facilities.

Permission is hereby granted to Endeavor Charter School or any medical consultant of Endeavor Charter School to examine records concerning examination or treatment received by the above-named student for the express purpose of evaluating medical or physical fitness for participation in, or continued participation in any athletic program at Endeavor Charter School and to furnish the medical consultant with any reports or copies of medical records said member may request. I understand that these medical records will be kept confidential.

- **Medication Statement:** Please provide your athlete with any necessary medications that he/she may need and require at all games and practices (epi-pens, inhalers, etc.). These medications will need to be in original containers with prescription labels. Do not assume that if your athlete has medications in the office at Endeavor Charter School that he/she will have access to them during practice. All Endeavor Pride athletic practices and games are held off-site and medications will not be checked out of the office for travel, so please provide your student athlete with any necessary medications they may need. Thank you.

Student Athlete Code of Conduct

I, the student athlete, represent Endeavor Charter School and its athletic program and therefore, have an obligation to follow and abide by the following code of conduct. A break in this code of conduct will lead to disciplinary action as outlined within the athletic policies; the consequences include, but are not limited to verbal/written warnings, ineligibility, suspensions and/or possible removal from the team depending upon the severity of the infraction.

I agree to...

1. Maintain at least a 2.0 GPA (eligibility requirement) throughout the participating season..
2. Attend school and athletic events regularly without exceeding the attendance guidelines outlined in the athletic manual and realize that academics is a priority and athletics is a privilege.
3. Maintain a positive, cooperative attitude and an acceptable level of behavior within all school settings, classrooms and athletic events.
4. Follow and abide by all athletic policies and procedures outlined in the athletic manual.
5. Provide positive support, care and encouragement to my teammates, coaches and school.
6. Refrain from making derogatory comments to teammates, coaches, opponents, parents and officials and refrain from use of foul language.
7. Be modest in victory, gracious in defeat and the example of what good sportsmanship is by recognizing, approving and applauding good team play and respecting the integrity of game officials.

Student Athlete Concussion Statement

I have read the **Student-Athlete Concussion Information** above with my parent/guardian.

It is my responsibility to tell my parents, my coach, and/or medical professional about my injuries and illnesses.

After reading the information sheet, I am aware of the following information:

- A concussion is a brain injury, which I am responsible for reporting to my coach(es), my parents, or a medical professional if one is available.
- A concussion can affect my ability to perform everyday activities, my ability to think, my balance, and my classroom performance.
- I realize I cannot see a concussion, but I might have some of the symptoms right away. Other symptoms can show up hours or days after the injury.
- If I think a teammate has a concussion, I am responsible for telling my coach(es), my parents, or a medical professional about their concussion.
- I will not return to play in a game or practice if a hit to my head or body causes any concussion-related symptoms.
- I need written permission from a medical professional trained in concussion management to return to play or practice after a concussion.
- After a concussion, the brain needs time to heal. I understand that I am much more likely to have another concussion or more serious brain injury if I return to play or practice before my symptoms go away.
- Sometimes, repeat concussions can cause serious and long-lasting problems.
- I have read the concussion symptoms on the Concussion Information above.