



Athletic/Activities Packet

Check off List:

- Parent and Student must read the “Athletic and Activities Code”.
- Complete and sign “Medical Insurance & Emergency Authorization Form”.
- Must have current **medical physical** on file. Physicals are good for 24 months from date of exam.
- Current **ASB Card** Required
- All forms must be returned to the Athletic Director’s office before student will be cleared to participate in athletics.**
- Athletic Director will check your grades for academic eligibility.

NAME _____ **DATE** _____

GENDER ___ **M** ___ **F** **BIRTHDATE** _____ **GRADE LEVEL** _____

ADDRESS _____

HOME PHONE NUMBER _____

SCHOOL ATTENDED LAST YEAR _____

_____ Foreign Exchange Student (Must complete WIAA Form 6) _____ Home School Student
 _____ 5th Year Senior _____ Other

Please check one sport per season for the current school year

Fall Sports:

- Boys Tennis
- Cross Country
- Football
- Girls Soccer
- Girls Swim
- Volleyball
- Team Manager

Winter Sports:

- Boys Basketball
- Boys Swim
- Girls Basketball
- Girls Bowling
- Wrestling
- Team Manager

Spring Sports:

- Baseball
- Boys Soccer
- Fastpitch
- Football (Spring)
- Girls Tennis
- Track
- Team Manager

Activities:

- Band
- Cheer
- Drill
- Flag Team

STUDENT: I am aware that playing or practicing to play/participate in any sport can be a dangerous activity involving many risks of injury. I understand that the dangers and risks of playing or practicing to play/participate in sports may result not only in serious injury, but in a serious impairment of my future abilities. I recognize that the danger of risk is even greater in contact sports such as football and wrestling. Because of the dangers of participating in sports, I recognize the importance of following coaches’ instructions regarding playing techniques, training and other team rules, etc. and agree to obey such instructions.

I have read and understand the Bremerton School District Athletics and Activities code and agree to abide by that Code.

Student Signature _____ Date _____

PARENT: I have read and understand the above warning. I have also read and understand the Bremerton School District Athletics and Activities Code.

As the parent/legal guardian of _____, I agree to support my student in abiding by the Code.

Parent Signature _____ Date _____

BREMERTON SCHOOL DISTRICT ATHLETICS AND ACTIVITIES CODE

READ THIS CODE CAREFULLY. BY SIGNING THE PERMISSION FORM, YOU ARE AGREEING TO ABIDE BY THIS CODE. KEEP THIS COPY FOR YOUR RECORDS.

The opportunity to participate in interscholastic athletic and activity programs is a privilege granted to all students of the Bremerton School District. These programs are to be considered a privilege and not a right. Therefore, these privileges can be revoked when deemed necessary. Academics are the first priority while partaking in a school-sponsored activity. Participants must not only be in compliance with the WIAA regulations, but also with that of the Bremerton School District Athletics/Activities Code, the school's Constitution and regulations imposed by the coaching staff.

As an active participant you are looked upon as a role model and a representative of Bremerton High School and must conduct yourself in a manner that reflects the school's ideals. The student/athlete's signature on this code represents a commitment to the rules set forth in the code. Consider this as your first warning.

ATTENDANCE:

Students must be in attendance the **entire** school day in order to participate that day (either practice or competition), unless approved notification is given to the coach prior to the absence or emergency approval by the administration is granted.

ACADEMIC ELIGIBILITY:

- Students participating in co-curricular activities must be enrolled in at least five classes.
- All high school students participating in co-curricular activities must be passing at least five (5) classes the semester they participate.
- In order to maintain athletic eligibility during the current semester the student shall maintain passing grades of:
 - 5 classes in a 5 period day
 - or 5 classes in a 6 period day
- Grade checks will be accomplished using the progress reports and/or end of semester grades, as applicable. Students failing to meet academic standards at the semester grades will be placed on a five (5)-week probationary period from the start of the next semester. Students failing at progress report grade checks will be placed on fourteen (14) calendar days probationary period. A second grade check will follow at the end of 14 days. If athlete raises deficiency, they will regain eligibility status. If athlete does not raise deficiency, they are suspended until deficiency has been cleared.
- In addition, grade checks may be required more often as deemed necessary for students on probation by the Athletic Director or the Appeals Board.
- Students may appeal their ineligibility, under extenuating circumstances, within three (3) days of notification.

TRANSPORTATION:

To get to an activity you must ride the team bus or ride with a coach that has the required license and vehicle. You are allowed to ride home with your own parent/guardian upon visual exchange between the coach and parent/guardian, as well as signed permission statement from the parent/guardian.

CRIMINAL OFFENSES:

It is a violation of Bremerton High School's Athletic Code for any student/athlete to commit any criminal act at any location. Disciplinary actions may result from such violations regardless of whether criminal charges or conviction results. Suspected violations will be individually reviewed and evaluated by the Athletic Director and/or Eligibility Board.

USAGE OF TOBACCO, ILLEGAL DRUGS, AND ALCOHOL:

Use of Tobacco and Alcohol

The use of tobacco and alcohol will not be tolerated.

1st Violation – Immediate five (5) school days suspension from activity.

2nd Violation – Immediate removal from the activity for the remainder of the season. If the offense happens towards the end of the season, the suspension may cross over onto next athlete's season of participation.

3rd Violation – Loss of activity privileges for the remainder of the school year. Before be considered for reinstatement the student(s) must prove completion of a substance abuse counseling program.

Use/Possession of Illegal Drugs

The illegal use of drugs and being in possession of will not be tolerated.

1st Violation – The student athlete will be immediately suspended for the remainder of the season.

2nd Violation – The student athlete shall be immediately suspended from all interscholastic participation for one (1) year from the date of the infraction. Before be considered for reinstatement the student(s) must prove completion of a substance abuse counseling program.

3rd Violation – The student athlete shall be permanently ineligible for interscholastic competition at BHS.

It is a violation of the Athletic Code to be on any premises while alcohol or other drugs are being used. If found to be in violation; the student athlete will be suspended from all co-curricular activities for three (3) school days from all activities.

PROCEDURE FOR APPEAL

The Appeal/Eligibility Board consists of:

1. Athletic Director – Moderator (no voting privileges)
2. Administrator
3. Faculty representative
4. ASB student representative
5. Out-of-season head coach (to be selected by Athletic Director)
6. Activities Director from MVMS

The Appeal Board will hear the student/athlete's appeal within two days of the Athletic Director receiving it and render a decision within three days. The student/athlete is ineligible to compete in contests until the appeal decision is completed.

SPORTSMANSHIP

Bremerton High School is a member of the Olympic League is responsible for following sportsmanship and spectator guidelines. These guidelines are published with the expectation that high school athletics will uphold the proper spirit of competition. All Knights are expected to abide by our tradition of good sportsmanship with all rivals, to show respect for the visiting school's student body and adults, and to display only signs supportive of our own school. Narrows League rules also prohibit artificial noisemakers, confetti, and antagonistic yelling.

MEDICAL INSURANCE & EMERGENCY AUTHORIZATION FORM

Name of Athlete _____ Grade _____

Address _____

INSURANCE:

Option 1 My son/daughter will enroll in the Student Accident Insurance Program offered through Bremerton School District.

Option 2 My child is covered by the insurance listed below and I will continue to keep it in force throughout the sports season. If there are any changes in this status, I will contact the school to inform them of changes in insurance. The high school principal or designee is authorized to contact the company named below to verify coverage limitations. I accept full responsibility for the cost of treatment of any injury that my son/daughter may suffer while taking part in the program.

Name of Company Providing Insurance: _____

Policy or Group # _____

Parent/Guardian Signature _____ Date _____

EMERGENCY AUTHORIZATION:

As parent or legal guardian, I authorize the team coach or trainer, or in their absence, a qualified physician to examine the above named student, and in the event of injury to administer emergency care and to arrange for any consultation by a specialist, including a surgeon, he deems necessary to insure proper care of any injury. Every effort will be made to contact parent or guardian to explain the nature of the problem prior to any involved treatment. I hereby give permission to the school to contact emergency transportation necessary at parent/guardian expense.

Name of Parent/Guardian: _____ Date _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Emergency Contact: _____ Phone: _____

Physician: _____ Phone: _____

If your physician is not available, will you accept the physician taking calls: Yes No
If no:

Alternate Physician: _____ Phone: _____

Hospital Preference: Harrison Hospital Navy Hospital Other

History of injuries and/or surgeries: _____

Allergies to drugs (please list): _____

I accept full responsibility for the cost of treatment for any injury, which my child may suffer while taking part in the athletic and activities programs at Bremerton School District.

Parent/Guardian Signature: _____ Date _____