HOPKINS ACADEMY ATHLETIC CODE

AND PARENT AUTHORIZATION

Athletic Code

All students who wish to participate on a Hopkins Academy athletic team should acquaint themselves thoroughly with the regulations listed below. Failure to abide by the following code could result in a case of ineligibility.

- 1. All Massachusetts Interscholastic Athletic Association rules must be strictly followed with regard to age, grades, chemical abuse, sportsmanship, etc.
- 2. A student must secure during the last marking period preceding the contest (e.g. second quarter marks and not semester grades determine third quarter eligibility) a passing grade in the equivalent of four traditional yearlong major subjects. To satisfy this requirement, a student must have passed sufficient courses so as to be earning for that marking period, credits totaling the equivalent of four traditional yearlong major English courses (20 credits). To be eligible for the fall marking period, students are required to have passed for the previous year the equivalent of four traditional year long major English courses (20 credits).
- 3. During the season of practice or play, a student shall not, regardless of quantity, use, consume, possess, buy/sell or give away any tobacco products (including e-cigarettes) any beverage containing alcohol, marijuana, steroids or any controlled substance.

First Violation:

The student shall lose eligibility for 25% of the regularly scheduled games/matches for the season. In addition, Hopkins Academy mandates that the student attend all practice sessions and all games held during this time.

Second and Subsequent Violations:

The student shall lose eligibility for 60% of the regularly scheduled contests held during that season. If after the second or subsequent violations, the student voluntarily becomes a participant in an approved chemical dependency program, the student may be certified for reinstatement after sitting out 40% of the events.

- 4. All Hopkins Academy athletes must maintain sound school citizenship during class, student activities, and on athletic teams. Neglect of this regulation or repeated minor offenses could terminate athletic membership.
- 5. Athletes must be in regular attendance at all practice sessions, games, and mandatory team functions. Planned absenteeism must be reported in advance to the appropriate coach. The coach may penalize absenteeism without a valid excuse or failure to report planned absenteeism in advance.
- 6. Students participating in athletics must be in school for at least three and one-half hrs. (3 1/2) on the days of all practices and games. Exceptions to the above policy may be made by the administration.

- 7. All Hopkins Academy athletes should conduct themselves in a sportsmanlike manner at all times. Cursing, fighting, and criticizing officials has no place in athletics.
- 8. Bona fide members of a school team are precluded from missing a high school practice or competition in order to practice or compete with an out-of-school team.
- 9. Any student athlete who is planning to go on vacation and miss part of an athletic season must get approval ahead of time from the administration. If a student is on vacation and misses 3-4 team events then they must attend at least 2 team events upon their return before they may participate in a contest. If a student is on vacation and misses 5-7 team events then they must attend at least 4 team events upon their return before they may participate in a contest. If the student is to miss more than seven team events than the number of team events required to play in the next contest will be decided upon by the administration.
- 10. A student who is approved by the administration to join a team after the first day of practices begin must participate in at least 10 team events before they participate in a contest. If a specific sport or team has less then 10 team events, starting at the beginning of the season and before the first contest, than that number will be reduced appropriately. Medical issues will be handled on a case by case basis.
- 11. All athletes are expected to attend, and stay for the duration, of sports banquets.
- 12. Any athlete who receives more than one suspension from a team will be removed from that team for the rest of the season. For a suspension to be official a coach must speak with the administration prior to enacting a suspension.

All athletes participating in the Interscholastic Athletic program are covered by an athletic school insurance policy (a) if they do not have personal coverage or (b) as a secondary insurance where personal insurance does not cover. All injuries <u>must</u> be reported to the coach who will make out an accident report.

PROCEDURE FOR FILING A CLAIM: (Beyond what your personal insurance covers)

a. The coach will fill out an Accident Report and submit it to the Athletic Director and Nurse.b. It is the parents' responsibility to complete and file the claim as instructed on the claim form. Claim forms are available from the school.

HEADS * UP CONCUSSION IN HIGH SCHOOL SPORTS

A FACT SHEET FOR PARENTS

What is a concussion?

A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

You can't see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

What are the signs and symptoms of a concussion?

If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

SYMPTOMS REPORTED BY ATHLETE

- · Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- · Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just "not feeling right" or "feeling down"

SIGNS OBSERVED BY PARENTS/GUARDIANS

- · Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- · Loses consciousness (even briefly)
- Shows mood. behavior, or personality changes

How can you help your child prevent a concussion or other serious brain injury?

- Ensure that they follow their coach's rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity. Protective equipment should fit properly and be well maintained.
- Wearing a helmet is a must to reduce the risk of a serious brain injury or skull fracture.
 - However, helmets are not designed to prevent concussions. There is no "concussion-proof" helmet. So, even with a helmet, it is important for kids and teens to avoid hits to the head.

What should you do if you think your child has a concussion?

SEEK MEDICAL ATTENTION RIGHT AWAY. A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to regular activities, including sports.

KEEP YOUR CHILD OUT OF PLAY. Concussions take time to heal. Don't let your child return to play the day of the injury and until a health care professional says it's OK. Children who return to play too soon—while the brain is still healing risk a greater chance of having a repeat concussion. Repeat or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

TELL YOUR CHILD'S COACH ABOUT ANY PREVIOUS **CONCUSSION.** Coaches should know if your child had a previous concussion. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

If you think your teen has a concussion: Don't assess it yourself. Take him/her out of play. Seek the advice of a health care professional.

It's better to miss one game than the whole season.

For more information, visit www.cdc.gov/Concussion.



STUDENT AGREEMENT AND PARENT AUTHORIZATION

I have read the athletic code, and I promise on my honor to obey all rules and regulations pertaining to athletics at Hopkins Academy.

Date:	Signature of Student:
(Name of St	has my permission to participate in
(Name of St	udent)
(Sport)	, and I have read the Athletic Code that he or she must follow
Date:	Signature of Parent/Guardian
Personal	Insurance Information: (check one) We have:
	Blue Cross/Blue Shield
	Health New England
	Private commercial coverage
	Other:
	No coverage

**Items not covered by this code will be ruled on by the Hopkins Academy Administration.

***Please complete and return this form, along with the Sportsmanship and Hazing forms to your coach. Be sure to sign where indicated. The Athletic Code (pages 1 and 2) should be retained for reference by students and parents.

STUDENT ATHLETE UNDERSTANDING OF HAZING LAWS SIGN OFF FORM
Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

Chapter 269 of the General Laws is hereby amended by adding the following three sections:

<u>Section 17</u>. Whoever is a principle organizer or participant in the crime of hazing as defined herein shall be punished by a fine of not more than one thousand dollars or by imprisonment in a house of correction for not more than one hundred days, or by both such fine and imprisonment.

The term "hazing" as used in this section and in sections eighteen and nineteen, shall mean any conduct or method of initiation into any student organization, whether on public or private property, which willfully or recklessly endangers the physical or mental health of any student or other person. Such conduct shall include whipping, beating, branding, forced calisthenics, exposure to the weather, forced consumption of any food, liquor, beverage, drug or other substance, or any other brutal treatment or forced physical activity which is likely to adversely affect the physical health or safety of any such student or other person, or which subjects such student or other person, to extreme mental stress, including extended deprivation of sleep or rest or extended isolation.

<u>Section 18.</u> Whoever knows that another person is the victim of hazing as defined in section seventeen and is at the scene of such crime shall, to the extent that such person can do so without danger or peril to himself or others, report such crime to an appropriate law enforcement official as soon as reasonably practical. Whoever fails to report such crime shall be punished by a fine of not more than five hundred dollars.

Section 19. Each secondary school and each public and private school or college shall issue to every group or organization under its authority or operating on or in conjunction with its campus or school, and to every member, plebe, pledgee or applicant for membership in such group or organization, a copy of this section and sections seventeen and eighteen. An officer of each such group or organization, and each individual receiving a copy of said sections seventeen and eighteen shall sign an acknowledgement stating that such group, organization or individual has received a copy of said sections seventeen and eighteen.

Each secondary school and each public or private school or college shall file, at least annually, a report with the regents of higher education and in the case of secondary schools, the board of education, certifying that such institution has complied with the provisions of this section and also certifying that said school has adopted a disciplinary policy with regards to the organizers and participants of hazing. The board of regents and in the case of secondary schools, the board of education shall promulgate regulations governing the content and frequency of such reports, and shall forthwith report to the attorney general any such institution which fails to make such report.

Passed to be enacted by:		
House of Representatives, November 13, 198	.5	
Passed to be enacted by:		
Senate, November 14, 1985		
Approved by:		
Governor, November 26, 1985		
Student Athlete's Signature	Date	

Activity:	
	(Current Sport)

Waiver, Release of All Claims and Hold Harmless Agreement for **Town of Hadley**

Please read this form carefully and be aware that by signing this form you will be waiving and releasing claims for potential injuries, arising out of normal participation in voluntary extracurricular activities. The terms "I", "me", "my" also refer to parents or guardians as well as individual participants. In signing this form you are agreeing as follows:

I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of any injuries, which may be sustained as a result of my/my child's normal participation in voluntary extracurricular activities. I further recognize and acknowledge that athletic activities involve strenuous exertion, potential body contact and risks of injury as a result of normal participation.

I agree to waive and relinquish any and all claims that I may have as a result of normal participation in voluntary extracurricular activities against the TOWN OF HADLEY, any and all other participating governmental units, any and all independent contractors, officers, agents and employees of the governmental bodies and independent contractors, and any and all other persons and entities, of whatever nature, that might be directly or indirectly liable for any injuries that I might sustain from normal participation in the activity (The parties described in the preceding sentence are referred to as "released parties" in the remainder of the Agreement).

I do hereby fully release and discharge the TOWN OF HADLEY and the other released parties from any and all claims for injuries, damage or loss which I may have or which may accrue on account of my/my child's normal participation in voluntary extracurricular activities which do not arise out of or are not the direct result of negligent, grossly negligent, wanton, willful or intentional acts on the part of the above released parties.

I understand the nature of the activities for which I am/my child is registering, and has read and fully understands this Waiver, Release and Hold Harmless Agreement.

Printed Name of Participant:		
Signature of Participant:		
Parent /Legal Guardian:	 	
Date		

File: JJIA-E-2

SPORTSMANSHIP - THE PARTICIPANT'S RESPONSIBILITY

Respect, commitment, dedication and hard work - these are the qualities that describe you, the athlete, and these are the same attributes your opponent brings to the competition. Your opponent is exactly that, an opponent, not your enemy. By treating your opponent with courtesy and respect, you demonstrate respect for yourself, your family, your community and your school. As an athlete you bring to every competition an attitude that you will do your best to win, that you will strive to achieve, to excel, and this is the way it should be. But, competition is designed to be played by the highest standards of fair play, and within the rules of the game. To win by bending the rules of the game means that you were not able to win by playing by the rules.

Some things participants can do to see that the game is played well and that indicate a willingness to practice good sportsmanship include:

- 1. Participants should not argue with officials. First of all, you never win and seldom does an official change their call. Your chances of picking up a technical or unsportsmanlike penalty are increased. Your performance is affected because you are emotionally upset and your mind is not on the game and what needs to be accomplished. You incite the crowd and create a negative attitude.
- 2. Participants should never make negative comments to an opposing player or coach.
- 3. Treat an opponent as you would like to be treated, especially if you are the home team. Remember, being friendly doesn't mean you can't be competitive.
- 4. Participants should cheer for their own team. Negative comments about an opposing player's performance are never appropriate.
- 5. If you see a play by an opponent that you feel was well done, there is nothing wrong with a positive acknowledgement of that.
- 6. Participants leaving the playing site after a victory should refrain from gloating after a victory. You should be happy you won, but it is not necessary to do so at the expense of your opponent. You create negative feelings and can cause a very hostile situation. You may also be giving your opponents that extra edge they need to beat you the next time around.

Coaches must pass out a copy of this form to players and parents, and the student athlete must sign said form.

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requested conduct.	to ablue by the outlined
Student Athlete's Signature	Date

Re-adopted by School Committee 5/20/2008 Hadley Public Schools

Hadley Public Schools

Sports Concussion History

Please complete the following: Student's Name: _____ Sex: ____ Age:_____ Date of Birth:_____ Grade:_____ School: Current Sport:____ Sports Played: Address: Telephone: Home/Cell: In case of emergency, contact: Name:______Relationship:_____ Telephone: Home: Work: Concussion History: Previously Diagnosed Concussion: 1.Date of Last Concussion: 2.Sport/Activity: 3.Symptoms: 4.Duration of Symptoms: Total Number of physician diagnosed concussions: I am aware of the signs and symptoms of concussion: yes ____ no ____ I agree to report any signs or symptoms of concussion that I experience or that I observe in my teammates to the coach. Student: Date: Parent: Date:



Parent Concussion Training Verification

Student Athlete's Nam	e:	
I,	, have con	npleted either
1. Center for Disease C Youth Sports On-Line	Control and Prevention H Training Program	leads Up Concussion in
http://www.cdc.gov/co	oncussion/HeadsUp/onlin	ne_training.html
2. National Federation Sports – What you Ne		ssociations Concussion in
http://nfhslearn.com/?c	courseID=15000	
to fulfill my obligation program.	of my annual concussio	n training for the Hopkins Academy Athletic
Signature:		Date:
	S ACADEMY M	EDICAL CONSENT FORM
Permission is hereby gratereatment, x-ray examinated illness, the need for majorade by the attending plant able to communicate may be given. In the event that an emerograms or guardians as s	nted to the attending physications and immunizations for surgery, or significant activities to contact me in the with me, the treatment necessity arises during a practicon as possible. Permission	cian to proceed with any medical or minor surgical for the above named student. In the event of serious ecidental injury. I understand that an attempt will be not expeditious way possible. If said physician is cessary for the best interest of the above named student tice session, an effort will be made to contact the on is also granted to the coach or athletic trainer to ete prior to his admission to the medical facilities.
Signature of Parent or G	vordian	Date
Phone numbers where pa		Date
Office		Name of Family Physician:
Home Other		Phone Number

