

**IDAHO HIGH SCHOOL ACTIVITIES ASSOCIATION
IDAHO HEALTH EXAMINATION AND CONSENT FORM**

It is required that all students complete a History and Physical examination prior to his/her first 9th and 11th grade practice in the interscholastic (9-12) athletic program in the State of Idaho. The exam is at the expense of the student and may not be taken prior to May 1 of the 8th and 10th grade years. This examination is to be done by a licensed physician, physician's assistant or nurse practitioner under optimal conditions. Interim history forms are required during the 10th and 12th grade years and must be submitted to the principal prior to the first practice.

Name _____ Home Address _____ Phone _____
 Grade _____ Sports _____
 Personal Physician _____ Physician's phone number _____
 Date of Birth _____ Sex _____ School _____

HISTORY FORM

*Fill in details of "YES" answers in space below:

- | | YES | NO | | YES | NO |
|--|-------|-------|---|-------|-------|
| 1. A. Have you ever been hospitalized? | _____ | _____ | 5. Do you have any skin problems?
(itching, rash, acne) | _____ | _____ |
| B. Have you ever had surgery? | _____ | _____ | 6. A. Have you ever had a head injury? | _____ | _____ |
| 2. Are you presently taking any medication or pills? | _____ | _____ | B. Have you ever been knocked out or unconscious? | _____ | _____ |
| 3. Do you have any allergies (medicine, bees, other stinging insects)? | _____ | _____ | C. Have you ever had a seizure? | _____ | _____ |
| 4. A. Have you ever passed out during or after exercise? | _____ | _____ | D. Have you ever had a stinger, burner, or pinched nerve? | _____ | _____ |
| B. Have you ever been dizzy during or after exercise? | _____ | _____ | 7. A. Have you ever had heat cramps? | _____ | _____ |
| C. Have you ever had chest pain during or after exercise? | _____ | _____ | B. Have you ever been dizzy or passed out in the heat? | _____ | _____ |
| D. Do you tire more quickly than your friends during exercise? | _____ | _____ | 8. Do you have trouble breathing or cough during or after exercise? | _____ | _____ |
| E. Have you ever had high blood pressure? | _____ | _____ | 9. Do you use special equipment, pads, braces, mouth or eyeguards? | _____ | _____ |
| F. Have you ever been told you have a heart murmur? | _____ | _____ | 10. A. Have you had problems with your eyes or vision? | _____ | _____ |
| G. Have you ever had racing of your heart or skipped beats? | _____ | _____ | B. Do you wear glasses, contacts or protective eyewear? | _____ | _____ |
| H. Has anyone in your family died of heart problems or a sudden death before age 50? | _____ | _____ | | | |

11. Have you ever sprained/strained, dislocated, fractured/broken, or had repeated swelling or other injuries of any of your bones or joints?
- | | | | | |
|----------------|-------------|-----------------|-------------|------------|
| _____ Head | _____ Neck | _____ Chest | _____ Back | _____ Hip |
| _____ Shoulder | _____ Elbow | _____ Forearm | _____ Wrist | _____ Hand |
| _____ Thigh | _____ Knee | _____ Shin/Calf | _____ Ankle | _____ Foot |

12. Have you ever had any other medical problems such as:
- | | | | | |
|---------------------|--------------------|---------------------|-----------------|----------------------------|
| _____ Mononucleosis | _____ Diabetes | _____ Asthma | _____ Hepatitis | _____ Headaches (frequent) |
| _____ Tuberculosis | _____ Eye injuries | _____ Stomach ulcer | _____ Other | |

13. Have you had a medical problem or injury since last exam? _____
14. When was your last tetanus shot? _____
 When was your last measles immunization? _____
15. When was your first menstrual period? _____ When was your last menstrual period? _____
 What was the longest time between periods last year? _____

*Explain "YES" answers here: _____

CONSENT FORM

(Parent or Guardian and Student Permission and Approval)

I hereby consent to the above named student participating in the interscholastic athletic program at his/her school of attendance. This consent includes travel to and from athletic contests and practice sessions. I further consent to treatment deemed necessary by physicians designated by school authorities for any illness or injury resulting from his/her athletic participation. In the absence of parents, I also consent to the release of any information contained in this form to carry out treatment and health care operations for the above named student.

PARENT OR GUARDIAN SIGNATURE _____ DATE: _____

This application to compete in interscholastic athletics for the above school is entirely voluntary on my part and is made with the understanding that I have not violated any of the eligibility rules and regulations of the State Association.

SIGNATURE OF STUDENT _____ DATE: _____

PHYSICAL EXAMINATION FORM

Height _____ Weight _____ BP _____ / _____ T _____ Pulse _____ R _____
 Visual acuity R 20 / _____ L 20 / _____ Corrected: Y N Pupils _____

	Normal	Abnormal
Ears, Nose, Throat	_____	_____
Cardiopulmonary		
Pulses	_____	_____
Heart	_____	_____
Lungs	_____	_____
Skin	_____	_____
Abdominal	_____	_____
Genitalia	_____	_____
Musculoskeletal	_____	_____
Neck	_____	_____
Shoulder	_____	_____
Elbow	_____	_____
Wrist	_____	_____
Hand	_____	_____
Back	_____	_____
Knee	_____	_____
Ankle	_____	_____
Foot	_____	_____

CLEARANCE / RECOMMENDATIONS

Clearance:

- _____ A. Cleared for all sports and other school-sponsored activities.
- _____ B. Cleared after completing evaluation / rehabilitation for:

- _____ C. *NOT* cleared to participate in the following IHSAA sponsored sports:
 Baseball Cross Country Golf Softball Track
 Wrestling
 Basketball Football Soccer Tennis
 Volleyball
 Not cleared for other school-sponsored activities:
 (Example) 1. Swimming 2. _____ 3. _____
- _____ D. Student is *NOT* permitted to participate in high school athletics. Reason: _____

Recommendation: _____

Examiner's Signature: _____ Date: _____
 (This Physical form must be signed by a licensed physician, physician's assistant or nurse practitioner)

Address: _____ Phone: (_____) _____

LAKELAND HIGH SCHOOL EMERGENCY INFORMATION

Office Use Only

Grade Level _____

Physical _____

DTR _____

ASB _____

Please Print

Name _____ Birth date _____

Parent/Guardian _____

Address _____

Home Phone _____

Mother's Work Phone _____

Mother's Cell Phone _____

Father's Work Phone _____

Father's Cell Phone _____

If an emergency and if parent/guardian can not be contacted, notify:

Name _____ Phone _____

Family Physician _____ Phone _____

Known Allergies _____

The team coach may apply first aid treatment until the family doctor can be contacted.

Yes No

We give our consent for the coach to use their own judgment in securing medical aid and ambulance services in case the parents cannot be reached.

Yes No

Signature of Parent/Guardian

Date

Philosophy and Code for Interscholastic Activities

The interscholastic activities program of Lakeland Joint School District is designed to involve students in wholesome, healthy competition; teach respect for rules and authority; teach respect for property and person of others; develop self-discipline through rigorous training; develop sportsmanship through winning and losing in competition; teach the fundamentals of each activity and develop the individual participant to his/her fullest potential; teach democratic values through participation; teach the students the values of participation; teach the student the value of working with others as a team; build physical and mental capacities; and to develop the attributes of cooperation and social adjustments, especially stressing high moral character.

Participation in interscholastic activities programs is a privilege to those students willing to agree to and abide by the rules and guidelines established by the coaches and advisors, the administration, the Board of Trustees, and the Idaho High School Interscholastic Activities Association.

To implement and teach the philosophy, the following rules are established for participants to observe and follow. The student shall:

1. Attend classes regularly, strive for academic achievement, and set positive examples in the school and community with his/her personal conduct.
2. Attend school the entire day before practicing or competing inter-scholastically unless special permission for absence has been granted in advance by the principal.
3. Confirm with the instructions, guidelines, and training rules established by the coach or advisor with reference to but not limited to the practice schedule, equipment use, physical conditioning, and practice activities.
4. Not use profanity or obscene language.
5. Maintain standards or dress set by the school and the coach or advisor.
6. Not be involved in the willful destruction and/or theft of school or personal property.
7. Maintain standards of scholastic eligibility established by IHSA and/or the school.
8. Not use or possess illegal drugs, alcohol, or tobacco during the school year, as outlined in "B" under definitions.

DISCIPLINE

Violations of rules 1 through 7 or conduct that brings discredit to the participant, the school, or community, could result in temporary or permanent suspension from the activity with a subsequent loss of award. Such determination shall be made by the coach and/or the administration. A violation of rule 8 shall result in one of the following actions and other discipline as designated by the principal which may include the loss of letter or other award.

- A. The use or possession of tobacco shall result in an immediate 20 school suspension from all inter-scholastic activity participation and practice. Five days of practice must follow any suspension before participation in a contest.
- B. The use or possession of alcohol or illegal drugs (as defined in Board Policy) shall result in an immediate suspension for 40 school days (plus five). A student may choose to reduce suspension under (B) to 20 days (plus five) by completing an approved substance abuse assessment and treatment program. A contract plus a minimum of 8 hours in the program must be successfully completed prior to reinstatement in any inter-scholastic activity.
- C. A student who voluntarily discusses his/her substance abuse problem with a coach, counselor, or administrator, and agrees to participate in an approved substance abuse assessment and treatment program shall not be subject to suspension if a violation has not been otherwise reported.
- D. A student who knowingly sells, delivers, or otherwise provides drugs, alcohol, or tobacco to another student or a student who has a second violation of rule 8 during the same year shall be suspended from all inter-scholastic activities for one calendar year.

DEFINITIONS

- A. Illegal Drugs – as defined in Board Policy, Article VI. Section F.
- B. School Day – Shall be any day within the adopted school year calendar plus any days prior to the opening of the school year which are allowed for inter-scholastic activities under IHSAA rules.
- C. Suspension – The student shall not be allowed to participate in practices or contests during suspension time. A minimum of five school days of practice (assuming the IHSAA required practice time has previously been met) will be required prior to any involvement in any inter-scholastic contest after a suspension.
- D. Approved Substance Abuse Program – The program must involve an intake or assessment procedure followed by appropriately prescribed treatment. This may vary from "awareness education" to "addiction treatment". The family and school personnel should be involved in the assessment and treatment if prescribed. The program should involve at least 15 hours of counseling beyond assessment over a minimum of 5 weeks. The student and his/her parent or guardian shall be responsible for all costs and arrangements for the program. Students choosing this option shall, with a parent or guardian, sign a contract. Failure to fulfill the contract and complete the program shall result in suspension from all interscholastic activities for one calendar year from the date of violation.

COMMITMENT TO THE CODE

Prior to participation in an activity, each student shall have a copy of the above "Code" signed and dated by himself/herself and a parent on file in the school office. Failure to comply with this provision shall preclude any participation in any activity until such time as the student and parent/guardian have complied with this section.

ASSOCIATION WITH IHSAA

Upon payment of annual dues, Lakeland Joint School District assumes membership in the Idaho High School Inter-scholastic Activities Association and thereby recognizes and accepts the constitution, bylaws, rules, and regulations of the Association currently adopted, or thereafter amended, for the governing of all high school (grades 9-12) inter-scholastic activities for Lakeland Schools.

ATHLETIC INSURANCE RELEASE

Lakeland Joint School District No. 272 does not provide medical and/or dental insurance coverage for students involved in extracurricular activities. Nor does the Idaho High School Activities Association require a student to have athletic insurance.

Since parents assume financial responsibility for medical and dental expenses for injuries to their children for regular school or extracurricular related accidents, any policy obtained should be checked carefully if you have a child playing football, as many insurance companies exclude football.

The school offers an inexpensive insurance plan made available through a private company which will cover students during school hours, while traveling to and from school, and while engaged in athletics. Coverage is also available for 24 hours per day and for 142 months if parents desire additional insurance. Forms are available in the school office.

Again, under ordinary circumstances, Lakeland Joint School District is not liable for injuries to students who are engaging in extracurricular school activities. Parents also assume responsibility for injuries to students injured while traveling to and from all student activities (except injury directly resulting from an accident involving school district operated vehicles).

ATHLETIC INJURY WARNING

I give permission for my child to participate in organized school athletics. I acknowledge that even with the best coaching, use of the most advanced protective equipment, and strict observance of rules, injuries are still a possibility. On rare occasion these injuries can be so severe as to result in total disability, paralysis, or even death.

Parent/guardian and student signatures at the bottom of this page indicate knowledge and understanding of the Philosophy and Code for Interscholastic Activities, the Eligibility Policy, the Athletic Insurance Release, the Athletic Injury Warning, and IHSAA Rules and Regulations. Complete IHSAA and District manuals are available in the school office for review.

Parent/Guardian Signature

Date

Student Signature

Date

IDAHO HIGH SCHOOL ACTIVITIES ASSOCIATION RULES & REGULATIONS

General

Any school may narrow the scope of its activities and have rules governing participants in addition to these rules, provided the same do not conflict with or violate the association rules.

Enrollment/Attendance

1. A student on a school team shall be enrolled in the school sponsoring that team unless it is involved in an approved cooperative school program.
2. A student is entitled to athletic eligibility for eight consecutive semesters after the student first enrolls in the ninth grade. The semesters of eligibility continue to be spent even though a student might not participate every semester.
3. In order to be eligible for interscholastic athletic competition during any semester, the student must enroll and attend school no later than the eleventh school day of the semester.
4. No student shall be permitted to participate in more than four seasons of any one activity at the high school level in Idaho.

Non-School Participation

A student who participates in organized non-school sports competition after the starting date of the high school season in that sport, except provided in Rule 12, is ineligible for the school team for the remainder of that sport season.

Practice Before Contests

A student must have ten days of practice prior to the first contest of an interscholastic athletic competition sports season. The ten days are not required for athletes who have been participating in an IHSAA sanctioned sport immediately preceding the start of practice providing the preceding season extends beyond the beginning of the current season. Participation in physical education classes does not constitute practice. Practices on Sundays can not count toward the ten days of practice.

Conduct/Discipline

The conduct of contestants and school spectators at all IHSAA sponsored activities shall be such that it does not bring discredit to the school of the Association. Such conduct must not disrupt the discipline, order, safety, or educational environment of the high school activities.

The member school principal is responsible for initiating appropriate disciplinary measures against students or school personnel for improper or unethical practices. A report of such action shall be forwarded to the Executive Director.

Academic

1. To be academically eligible for athletics, a student must be enrolled full time and received passing grades and earned credits in at least five (5) full credit subjects, or the equivalency, in the previous semester or grading period for which credit is granted.
2. An incomplete or conditional grade received at the end of a semester counts as a failure until the deficiency is removed.

Age

A student becomes ineligible for athletics on his/her twentieth (20th) birthday. This rule is non-appealable.

All-Star Competition

Only those students who have entered the 12th grade may participate in any all-star, benefit, or similar contests. Such contests may not be held during the IHSAA season.

Amateur Status

A student who represents a school in an interscholastic sport shall be amateur in that sport. An amateur athlete is one who engages in athletic competition solely for the physical, mental, social, and pleasure benefits derived therefrom. An athlete forfeits amateur status in a sport by competing for money or by receiving any prize, award, or gift of monetary value greater than twenty five (\$25.00) dollars.

Student Name _____
(Please Print)

Grade _____

Lakeland Joint School District 272

EXTRACURRICULAR ACTIVITIES CONSENT FORM

DRUG AND ALCOHOL TESTING PROGRAM

I have received, read, and understand the "Lakeland Joint School District 272 Drug and Alcohol Testing Program." I desire that _____ participate in this program and in the extracurricular program of Lakeland Joint School District 272, and hereby, voluntarily agree to be subject to its terms for the entire Junior and Senior High School career (grades 7-12). I accept the method of obtaining urine specimens, testing, and analyses of such specimen, and all other aspects of the program. I agree to cooperate in furnishing urine specimens that may be required from time to time.

I understand that if I test positive for illegal drugs, misuse of legal drugs, or alcohol, I will be suspended from participation in all extracurricular activities according to the terms of the Philosophy and Code of Interscholastic Activities and the Drug and Alcohol Testing for Students Policy.

I further agree and consent to the disclosure of the sampling, testing, and results provided for this program. This consent is given pursuant to all State and Federal Privacy Statues, and is a waiver of rights to nondisclosure of such test records and results only to the extent of the disclosures in the program.

Date: _____, 20_____

Student Signature

Parent/Guardian Signature