

Athletic Participation Sign-Off Sheet

PreParticipation Physical Evaluation Form: (All 4 Pages) I understand that one physical completed on the state designated form is required every 365 days in order for my son/daughter to participate in athletics or cheerleading. (Form Available Online)

Health History Update Questionnaire: The answers provided in the athletic Health History Section are correct. I the parent/guardian along with my son/daughter whose signature appears below understand that any misrepresentation of any of the information contained herein will result in the student being denied the opportunity to participate. I/we understand that the health history update form must be completed prior to each season if the pre-participation physical exam was greater than 90 days prior to the athletic season. (Form Available Online)

Activity/Athletic Eligibility Form: I the parent/guardian along with my son/daughter whose signature appears below; hereby consent to participation and I/We understand the rules, regulations and academic eligibility requirements. (Form Available Online)

Sports-Related Concussion and Head Injury Fact Sheet: I the parent/guardian along with my son/daughter whose signature appears below; have received, read and understand the NJ Department of Education Concussion and Head Injury fact sheet. I/We understand that a student athlete or cheerleader that has sustained a concussion must complete the graduated return to play protocol before they may resume competition or practice. Head injuries that occur outside of interscholastic athletic/cheerleading must be reported to the school. (Information Available Online)

Board Policy 2431.4: I the parent/guardian along with my son/daughter whose signature appears below; have received, read and understand Prevention and Treatment of Sports-Related Concussions and Head Injuries Board Policy 2431.4. (*Available Online Only*)

NJSIAA Steroid Testing Policy: By signing below I the parent/guardian along with my son/daughter have read and consent to the NJSIAA steroid testing policy. (Information Available Online)

NJSIAA Banned Drugs: I the parent/guardian along with my son/daughter whose signature appears below; have read the NJSIAA Banned Drug documentation. (*Available Online Only*)

Sudden Cardiac Death Pamphlet and Sign-Off Sheet: I the parent/guardian along with my son/daughter whose signature appears below; acknowledge that we received and reviewed the Sudden Death in Young Athletes Pamphlet. (Information and Sign-Off Form Available Online)

Parental Code of Conduct: I the parent/guardian along with my son/daughter whose signature appears below; have received, read and understand the Parental Code of Conduct for Athletic Events. (Form Available Online)

Code of Conduct: I the parent/guardian along with my son/daughter whose signature appears below; have received, read and understand the Extra-Curricular Code of Conduct. (Form Available Online)

Athletic Emergency Information: Completed as Indicated (Form Available Online)

Athletic Media Consent Form: Completed as Indicated (Form Available Online)

Student Emergency Information for Coach/Advisor: Completed as Indicated (Form Available Online)

Scholastic Student-Athlete Safety Act Sheet: Received (Information Available Online)

Print Athlete's Name _____ **Sport** _____

Student Signature _____ **Grade** _____

Parent/Guardian Signature _____ **Phone** _____

*** All forms and information can be found online on the school website under Athletics*