

UNIVERSITY OF CENTRAL OKLAHOMA
TRYOUT PACKET – Prospective Student-Athletes Athletic Compliance Department



SPORT:	Softball	TRYOUT DATE:	
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Notice of a tryout must be provided to the Athletic Training Staff & Athletic Compliance Department no later than 24 hours prior to a tryout

NAME OF PROSPECT:		Permanent Mailing Address:
Date of Birth:		
Phone:		
Classification:		

In order to participate in a tryout, all of the following **must be provided**:
 (Please check all that have been provided)

- Current Academic Transcript
- Athletic Activity Waiver (signed & dated)
- Sickle-Cell Test Results or Sickle Cell Release (signed & dated)
- Medical Examination. A medical examination may be conducted as part of the tryout **or** prospect must turn in proof of a medical examination **&** a full-time UCO athletic trainer must evaluate the document **prior to** participation.

Please answer the following:

TRYOUT TIME (max of 2 hours)	
START TIME	STOP TIME

Was competition involved? (Yes/No)	
Was clothing/equipment issued? (Yes/No)	
If clothing/equipment was issued, was it returned? (Yes/No)	
Was the tryout on an unofficial visit? (Yes/No)	

NCAA Division II Tryout Criteria - Prospective Student-Athletes

- 1) No more than 1 tryout, per sport, per prospect, per institution, per academic year is permitted.
- 2) A tryout may be conducted beginning June 15 immediately preceding of the prospective student-athlete's (PSA) junior year in high school in the term other than the term(s) in which the PSA's high school's traditional season in the sport occurs or who have completed his or her high school's traditional season in the sport; for a 2-year college student, after the conclusion of the sport season or anytime, provided the student has exhausted his or her 2-year college eligibility in the sport; and for a 4-year college student, after the conclusion of the sport season, provided written permission to contact the prospective student-athlete (per Bylaw 13.1.2) has been obtained.
- 3) A **medical examination, including a sickle cell test is required** and may be conducted as part of the tryout or one can be presented that was administered with the last six months. All examinations must be reviewed and approved by an UCO athletic trainer prior to a tryout.
- 4) A **current academic transcript** is required to determine the PSA's status.
- 5) A tryout may include tests to evaluate a prospect's strength, speed, agility, and sports skills.
- 6) The length of the tryout is limited to the length of UCO's normal practice period, but may be **no longer than 2 hours.**
- 7) Competition against a UCO team, in sports other than football and wrestling is permissible provided such competition occurs during the academic year and is considered CARA.
- 8) UCO may provide clothing and equipment to a prospect during a tryout only on an issuance and retrieval basis. Tryouts for football may not include helmets or pads.

1) COACH

I certify that all required documents have been properly completed, signed, and included in the tryout packet. All proper NCAA and UCO rules and regulations have been adhered to in regards to tryouts.

COACH SIGNATURE	DATE

2) ATHLETIC TRAINING

The UCO Athletic Training Staff certifies that the above named prospect has provided all necessary documentation and/or has been cleared, in accordance with all relevant UCO and NCAA bylaws, and may proceed in his/her tryout.

ATHLETIC TRAINING SIGNATURE	DATE

3) COMPLIANCE STAFF

The Athletic Compliance Department certifies that the above named prospect has supplied and completed all the required NCAA and UCO paperwork required for his/her tryout.

COMPLIANCE SIGNATURE	DATE



**WAIVER OF LIABILITY, ASSUMPTION OF RISK AND
HOLD HARMLESS AGREEMENT**

Activity/Sport:

Date:

In consideration of being allowed to participate in an Athletic Activity at University of Central Oklahoma (UCO) to take place on the _____ day(s) of _____, 20____, I state and agree as follows:

A. I am over eighteen (18) years of age (or if under 18, have had my parent or guardian give consent for my participation by signing this document in addition to my own signature) and am eligible to participate in the above-stated Activity.

B. I recognize that I am not required to participate in this Activity and choose to do so of my own free will (and if under eighteen (18) years of age with my parent's or guardian's consent).

C. I (and if under eighteen (18) years of age with my parent's or guardian's consent) understand that such Activity may involve the risk of physical and/or psychological injury and even death. I (and if under eighteen (18) years of age with my parent's or guardian's consent) voluntarily assume all such risks of loss, property damage, or personal injury, including death, that I may sustain or cause as a result of participating in this Activity, whether caused by my negligence or that of UCO or its officers, agents or employees and agree not to make any claim of any kind against UCO, its officers, agents or employees for any such injury. I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS UCO, its officers, agents and employees and/or the Regional University System of Oklahoma Colleges from any loss, liability, damage or costs, including court costs and attorneys fees, that they may incur due to my participation in such Activity, whether due to my negligence or theirs or otherwise.

D. By signing this agreement, I (and my parent/guardian if under eighteen (18) years of age) intend to bind other members of my family, and heirs and assigns to this Waiver of Liability, Assumption of Risk and Hold Harmless Agreement.

E. I (and my parent/guardian if under eighteen (18) years of age) have read this document before signing it. I (and my parent/guardian if under eighteen (18) years of age) have had an opportunity to consider its meaning, and I (and my parent/guardian if under eighteen (18) years of age) understand the document and sign it as a voluntary act and deed.

Printed Name of Participant

Signature

Date

Printed Name of Parent/Guardian

Signature

Date



SICKLE CELL TRY OUT RELEASE/WAIVER

Facts about Sickle Cell Trait:

- Sickle cell trait is an inherited condition of the oxygen-carrying protein, hemoglobin, in the red blood cells.
- Sickle cell trait is a common medical condition most predominate in African-Americans, but people of all races and background may test positive.
- Sickle cell trait is generally benign, and almost all of the 3 million Americans with sickle cell trait live healthy normal lives. However, during maximal exercise the oxygen levels in muscles can decrease sufficiently to cause some of the red cells to change from the normal disk shape to a crescent or sickle shape. These sickled red blood cells can block blood vessels in muscles, kidneys, and other organs resulting in severe damage to the involved tissues or even death.

The NCAA recommends that all NCAA student-athletes have knowledge of their sickle cell trait status.

I, _____(Print Name), understand and acknowledge that the NCAA and the University of Central Oklahoma (UCO) Athletic Department require that all student-athletes have knowledge of sickle cell trait status. Additionally, I have read and fully understand the aforementioned facts about sickle cell trait and sickle cell testing. Recognizing that my true physical condition is dependent upon an accurate medical history and a full disclosure of any symptoms, complaints, prior injuries, ailments, and/or other disabilities experienced, I hereby affirm that I have fully disclosed in writing any prior medical history and/or knowledge of sickle cell trait status to the UCO Sports Medicine staff.

If I'm selected to the team in which I have tried out, I understand that I will be required to undergo a sickle cell test as per the requirements of the University of Central Oklahoma Athletic Department before I will be allowed to participate in any additional physical or competition-related activities.

TWO OPTIONS

(Select only one of the following options – print name in only one spot and check box)

- 1) I _____ (Print Name) would like to undergo sickle cell testing and obtain the results prior to engaging in a tryout for the University of Central Oklahoma.*
- 2) I _____ (Print Name) do not wish to undergo sickle cell trait testing prior to my initial try out participation and I voluntarily agree to release, discharge, indemnify and hold harmless UCO, its officers, employees and agents from any and all costs, liabilities, expenses, claims, demands, or causes of action on account of any loss or personal injury that might result from my decision not to be tested prior to participation.

I have read and signed this document with full knowledge of its significance.

I further state that I am at least 18 years of age and competent to sign this waiver. If I am not 18 years of age I understand that I must obtain my parent/legal guardian signature before I will be allowed to participate in any tryout related activities or be directed to a facility to undergo a sickle cell test.

Student-Athlete Signature

Date

Parent/guardian signature (if under 18)

Date

(Parent/guardian print name)

*If Option 1 is selected the price of the sickle cell test will be charged to the UCO student's bursar account.