

# GLENWOOD CITY

## HIGH/MIDDLE SCHOOL



## Athlete & Co-Curricular Handbook

Casey Nolde – Athletic Assistant Coordinator  
Jacob Score – Athletic Director

### 2024-2025

# TABLE OF CONTENTS

Welcome.....	3
Philosophy .....	4
Objectives.....	4
Sportsmanship Expectations .....	4
Academic Standards .....	5
Ineligibility and Reinstatement .....	5
Fall Eligibility.....	5
Home School Participants.....	6
Attendance & Behavioral Expectations.....	6
Code of Conduct	
Disciplinary Procedures (Rules 1 – 3) .....	7
Disciplinary Procedures (Rules 4 - 7) .....	8
Reporting Violations.....	8
Appeals Process .....	8
Athletic Fees.....	9
Dual-Sport Participation.....	9
Changing Sports in Season .....	10
Disputes.....	10
Transportation .....	10
Awards .....	10
Participant Satisfaction Survey.....	10
Student Accident Insurance .....	11
Appendix	
Athletic Eligibility Checklist.....	13
Athletics & Activities Permission Form.....	14
Emergency Contact Information Form .....	15
Concussion Acknowledgement Form.....	16
Authorization to Disclose Health Information (HIPAA).....	17
WI DPI/ WIAA Concussion and Sudden Cardiac Arrest Parent Agreement .....	18
WI DPI/ WIAA Concussion and Sudden Cardiac Arrest Student Agreement .....	19

*The School District of Glenwood City does not discriminate on the basis of race, color, national origin, sex, disability or age in its educational programs and activities and provides equal access to the Boy Scouts, Girl Scouts and other designated youth groups. Patrick Olson has been designated to handle inquiries regarding non-discrimination policies. Please send inquiries to: Patrick Olson, Superintendent, 850 Maple St. Glenwood City, WI 54013, or call 715-265-7117, or email [patrick.olson@gcsd.k12.wi.us](mailto:patrick.olson@gcsd.k12.wi.us)*



Greetings Parents/Guardians and Students

The foundation of School District of Glenwood City is based upon solid educational programming – providing students opportunities to explore and hopefully, discover talents which will serve them well after their time here is done. Not only are we proud of the traditional educational programming that we provide in a small rural school, but we are equally proud of our students who decide to carry the name of our school on their chest when they step into the athletic arena or venture into co-curricular events.

Glenwood City has developed a strong tradition of excellence in athletics and co-curricular competition and we hope to continue on that path. Being a Hilltopper is about more than simply getting to wear the Blue, White and Red; it's learning about dedication, teamwork and how to overcome adversity; it's about winning with class and losing with dignity; it's about carrying on a tradition that honors and respects those that have come before them.

This handbook contains information as it relates to our students that compete in athletics and/or co-curricular opportunities further underscoring the importance of representing the school and community in all activities that students are involved in.

Students, parents/guardians, and coaches have a responsibility to become familiar with the contents of this handbook. Should you have any questions or need clarification of any aspect of the expectations, please take the opportunity to contact the athletics' office.

I look forward to assisting the continuation of excellence in athletics at Glenwood City as we embark upon the 2024-2025 school year as well as helping shape our students into the best that they can be. I encourage you to contact me with any questions, concerns or simply want to share a success story about one of our incredible students; after all, there is one more benefit of competing in high school sports – a sense of accomplishment.

Go Hilltoppers!

Jacob Score  
Athletic Director

**PHILOSOPHY:**

The School District of Glenwood City sponsors and encourages student participation in a variety of activities as a means of providing opportunities for personal growth, skill development, socialization, creativity, and competitive experience. The District believes that a well-balanced education includes participation in athletic and co-curricular activities.

The Board of Education has adopted this handbook in an effort to govern extracurricular programming. It is the responsibility of the Directors of Athletics and every student, parent/guardian, coach/advisor, any other person connected directly or indirectly with the athletic and activities programs to acquaint themselves with the items found within this handbook. The Director of Athletics, Principal and/or the Superintendent will address any items not expressly stated or implied in this handbook.

**OBJECTIVES:**

The Glenwood City School District and Board of Education sponsor athletic and co-curricular activities to provide an environment that fosters the following objectives:

- Learn good habits of health, fitness, and safety.
- Use the experience of competition to build self-esteem, citizenship, responsibility, and skill.
- Inspire positive role modeling and leadership.
- Display good sportsmanship and provide opportunities to develop lasting friendships with both teammates and opponents.
- Provide activities for learning self-discipline, loyalty, team play, pride in the organization, respect for the rights of others, and the will to be successful.
- Learn how to graciously celebrate successes and positively respond to disappointments.
- Emphasize the needs of the unit, team, class, and school above personal desires.
- Experience positive interactions with coaches/advisors and other students.

**SPORTSMANSHIP EXPECTATIONS:**

All student-athletes are expected to adhere to the following expectations of good sportsmanship both on and off the field of play:

- Accept and understand the seriousness of your responsibility and the privilege to represent your school and your community.
- Live up to the standards of good sportsmanship established by your coach/advisor, your school, your conference, the WIAA and all other organizational entities affiliated with athletics and activities at GCHS/GCMS.
- Learn the rules of the game and assist parents and fans by discussing the rules with them.
- Treat your opponents with mutual respect.
- Refrain from taunting, trash-talking, or making derogatory remarks to your opponents before, during, and after the contest.
- Refrain from intimidating behavior or drawing attention to yourself.
- Wish opponents "good luck" before a game and congratulate them in a sincere manner following defeat or victory.
- Respect the judgment of officials even if you disagree with their judgment.
- Win with humility; lose with grace. Do both with dignity.

## **ACADEMIC STANDARDS:**

In order to be academically eligible for athletics and activities, a student must:

1. Maintain a passing **QUARTER** grade in all subjects.
  - Minimum GPA exists for dual-sport athletes
2. Have no incompletes.
3. Carry a minimum of six (6) half-credits in the high school; five (5) half credits in the middle school each semester.

### **Ineligibility and Reinstatement**

Academic ineligibility due to a student receiving a failing grade will go into effect one school day after grades have been posted. Ineligibility is defined as not being allowed to participate in games/meets, attending and participating in practice is expected.

Academic ineligibility minimum will be the lesser of (a) 15 school days **OR** (b) one-third of the maximum number of games/meets allowed in a sport (rounded up if one-third results in a fraction); an ineligible student may not return to competition until the day following the completion of the ineligibility period.

A student may be reinstated when the student secures written proof that the student is meeting (passing) the academic standards associated with all classes in which they are enrolled. The student must complete a Grade Verification Form, securing signatures from all teachers; the form is to be submitted to the Director of Athletics/Activities one school day before reinstatement can occur. If the student does not meet the requirements, a check may be made until the athlete becomes eligible.

A student regains eligibility immediately if an incomplete is finished within the designated timeframe and results in a passing grade.

A student may erase ineligibility status following the last grade-reporting period of the school year through summer school courses that provide credit for the coursework that has caused the ineligibility. (HIGH SCHOOL ONLY – The student must successfully complete not less than the same number of courses that caused the ineligibility.)

### **Fall Eligibility**

**Athletics:** The WIAA provides that academic ineligibility status determined at the end of the fourth quarter can be adjusted for students in falls sports in which the date of earliest allowed competition is before the first day that students are in class.

The minimum ineligibility period shall be the lesser of (a) 21 consecutive calendar days beginning with the date of earliest allowed competition in a sport **OR** (b) one-third of the maximum number of games/meets allowed in a sport (rounded up if one-third results in a fraction).

**Activities:** The minimum ineligibility period shall be for the entire summer break (beginning one (1) school day after grades have been posted) and up to the first grade check of the following grading period, to be conducted after fifteen (15) school days.

## HOME SCHOOL PARTICIPANTS:

Any student residing in the School District of Glenwood City and receiving home-based private education may participate in any of our athletic and/or co-curricular based teams. In addition to being a district resident, the student must be enrolled in home-school programming, verifiable via the Wisconsin Department of Public Instruction's online portal. The student must also meet the required rules of eligibility as all other students at the school. This includes submission of a physical, signed code of conduct, acknowledgement of WIAA rules, emergency contact information, and demonstration of awareness of the state's concussion law.

## ATTENDANCE & BEHAVIORAL REQUIREMENTS:

Students who are absent during the school day may not be allowed to practice or participate in a contest on that given day. Please refer to the following table for clarification.

Students will be granted one attendance exception per sport season. If a student is to class prior to the start of second hour, they will be allowed to participate that evening.

ATTENDANCE CODE KEY	
Abbreviation	Definition
E-CT	Excused – Court
E-CV	Excused – College Visit
E-DT	Excused – Drivers Licensing
E-ME	Excused – Medical
E-MT	Excused - Military
E-PR	Excused – Principal Reviewed
E-SA	Excused – School Activity
E-IL	Excused – Ill (Parent)
E-PE	Excused – Parent/Guardian
I-SS	In-School Suspension
O-SS	Out-of-School Suspension
U-NN	Unexcused – No Note
T-E	Tardy – Excused
T-U	Tardy - Unexcused

Participation in extra and/or co-curriculars is allowed.

Participation in extra and/or co-curriculars is NOT allowed.

No impact on participation.

An “excused” absence on the day of a contest would include the following: doctor/dental appointments, funerals or family emergencies, or court appointments. Coaches are to review attendance daily, communicating eligibility with athletes as appropriate.

If the Director of Athletics/Activities is made aware of an unexcused absence after the practice or contest has already taken place, the student will miss the next comparable event.

Students who have had a disciplinary referral to the office regarding behavior may not be allowed to attend or participate in practice or competition. Any ineligibility will be communicated to parent/guardians as well as with the coach.

Students will dress appropriately according to school policies to practice and play in their sport. This includes:

- Dress appropriately for the weather and sport (wearing jerseys/ uniforms or similar clothing)
- Wear clothing that meets school dress code requirements

## **CODE OF CONDUCT:**

Participation in interscholastic athletics is considered a privilege. Failure to abide by the established rules will result in the removal of this privilege. The following rules are considered violations of the athlete handbook.

1. Purchase, possession or use of alcoholic beverages, illegal drugs and/or tobacco products (including e-cigarettes and vapes).
2. Violation of Wisconsin Statutes, county and municipal ordinances (motor vehicle, traffic violations or DNR violations which are not criminal offenses and not alcohol, tobacco or drug related will not be considered code violations.)
3. Committing serious and/or repeated violations of school regulations.
4. Insubordination or conduct contrary to the principles and standards of the School District of Glenwood City ("conduct unbecoming of an athlete").
5. Posting disparaging or disrespectful comments regarding coaches, teachers, school administrators, students, game officials, from Glenwood City and opposing schools, on social media.
6. Engaging in harassing and/or bullying behaviors.
7. Committing flagrant violations of game rules.

## **Notices:**

A student may not knowingly attend, whether or not they consume, a gathering where violation of state law or local ordinance regarding possession, purchase, sale or consumption of alcohol or illegal drugs occurs. The following penalties may be enacted for this violation.

1<sup>st</sup> Offense - Suspension from the next contest/event.

2<sup>nd</sup> Offense – Considered an athletic and co-curricular code violation and will result in the application of the disciplinary procedures listed below.

Violations are cumulative from year to year. Upon successful completion of middle school AND having no more than one violation, a student will begin high school with "no violations".

## **Disciplinary Procedures (Rules #1 -**

### **#3) First Offense:**

Athletics – Suspension from competition for 25% of the season; ten (10) hours of community service as assigned by the director of athletics. Attendance at practice is required.

Activities – Forty-five (45) day suspension from all club meetings and activities; ten (10) hours of community service as assigned by the director of athletics.

### **Second Offense:**

Athletics – Suspension from competition for 50% of the season; twenty (20) hours of community service as assigned by the director of athletics. Attendance at practice is required.

Activities – Ninety (90) day suspension from all club meetings and activities; Twenty (20) hours of community service as assigned by the director of athletics.

### **Third Offense:**

Athletics – Suspension from competition for one calendar year from the date of infraction and twenty (20) hours of community service as assigned by the director of athletics.

Activities – Suspension from co-curricular programs for one year from the date of infraction; twenty

(20) hours of community service as assigned by the director of athletics.

**Fourth Offense:**

Student no longer eligible for athletics or activities for the remainder of their high school career.

**NOTE:** Students that are involved in both athletics and activities may have their community service hours combined pending approval from the director of athletics.

**Disciplinary Procedures – (Rules #4 -#7)**

**First Offense:**

Athletics – Suspension from 10% of season; ten (10) hours of community service as assigned by the director of athletics. Attendance at practice is mandatory.

Activities – Fifteen (15) day suspension from all club meetings and activities; ten (10) hours of community service as assigned by the director of athletics.

**Second Offense:**

Athletics – Suspension from 25% of season; twenty (20) hours of community service as assigned by the director of athletics. Attendance at practice is mandatory.

Activities – Thirty (30) day suspension from all club meetings and activities; twenty (20) hours of community service as assigned by the director of athletics.

**Third Offense:**

Athletics – Suspension from competition for one calendar year from the date of infraction and twenty (20) hours of community service as assigned by the director of athletics.

Activities – Suspension from co-curricular programs for one year from the date of infraction; twenty (20) hours of community service as assigned by the director of athletics.

**Fourth Offense:**

Student no longer eligible for athletics or activities for the remainder of their high school career.

**REPORTING CODE VIOLATIONS:**

If an adult reports an alleged violation of the Code of Conduct, she/he must submit a signed statement fully explaining what she/he believes is the violation of the Code of Conduct, including specific information detailing the alleged violation.

If a student reports an alleged violation of the Code of Conduct, every effort will be made to protect the reporting student's identity; however, she/he must be willing to submit a signed statement fully explaining what she/he believes is the violation of the Code of Conduct including specific information detailing the alleged violation.

**APPEALS PROCESS:**

Parent/guardians may appeal the disciplinary actions for a violation of the Code of Conduct taken by the Director of Athletics/Activities to the Elementary Principal. Parents/guardians may appeal in writing to the Elementary Principal, within five (5) calendar days of the receipt of the suspension letter from the Director of Athletics/Activities. Appeals must be based on one of the following criteria –

- Parents/guardians or student believes an alleged offense did not occur.
- There are extenuating circumstances regarding the violation.
- The sanction imposed by Director of Athletics/Activities is unjust.



The letter of appeal must detail all of the facts pertaining to the incident, a list of witnesses, signed witness statements, an explanation of any extenuating circumstances surrounding the violation, and the specific remedy requested through the appeal. The student will remain ineligible throughout the entire appeal process.

Within three (3) days of receipt of the hearing request, the Elementary Principal will contact the parents/guardians to establish a hearing date for the appeal to be held within ten (10) days of the receipt of the written appeal.

In addition to the Elementary Principal, the following individuals shall be present at the hearing: the student, his/her parent(s)/guardian(s), legal or other representative (if the appellant so desires), and the Director of Athletics/Activities. No other individuals will be present at the hearing, and all matters discussed at the hearing will remain confidential.

During the hearing, the student and his/her parent(s)/guardian(s) will have an opportunity to speak and to present any evidence on his/her behalf. Witnesses may be called, but they must remain outside the Hearing Room until they are called and must leave immediately upon giving testimony. The Director of Athletics/Activities will present verbal and written statements gathered as a result of his/her investigation leading to the suspension, and may call witnesses.

Upon conclusion of the hearing, the Elementary Principal will decide whether to sustain, reverse, or decrease the length of the suspension. The Elementary Principal will render his/her decision in writing and/or verbally to the appealing parties.

If the parents/guardians feel that the appeal process was not followed, a request for a review of the process may be made to the Superintendent. However, the Superintendent will not review the facts or merits of the decision. Such a review must be requested in writing within seven (7) calendar days of the date on which the decision was rendered, and must identify the specific actions or failures to act that are the basis for the appeal.

The Superintendent will review the process and render a decision in writing within seven (7) calendar days. The decision of the Superintendent is final.

### **ATHLETIC FEES:**

Athletic Participation fees have been waived for the 2024-2025 school year.

### **DUAL-SPORT PARTICIPATION:**

Students are allowed to participate in more than one sport at a time; in order to be eligible to compete as a dual-sport athlete, the following criteria must be met -

1. The applicant must have achieved a minimum of a 2.67 cumulative grade point average at the last marking period prior to the beginning of the season.
2. A meeting between the student, parent(s)/guardian(s), coaches from each sport and the director of athletics must occur before the season to finalize arrangements between the two programs (practice, competition, etc.).
3. Athletes must declare a primary sport and secondary sport a minimum of one week prior to the first contest in either sport. Conflicts are handled as follows:
  - a. Primary practice over secondary practice
  - b. Primary game over secondary game
  - c. Secondary game over primary practice
  - d. (If games are rescheduled the priority still rests with the primary sport.)
4. Once competition has begun in the primary sport, no athlete will be allowed to quit his or her primary sport to participate in any other sport. It is permissible to quit the secondary sport or not participate in athletics altogether.

**CHANGING SPORTS IN-SEASON:**

If an athlete quits during the season, that athlete is not eligible to participate in any other sport during that season without the approval of the losing coach, the gaining coach, and the Director of Athletics. Athletic fees will NOT be refunded after the first competition has been completed.

**DISPUTES:**

Clarifications of misunderstandings or disputes between students, coaches/advisors, parents or any other interested party are to be resolved with the parties involved. If this is not possible, the dispute may be brought to the following parties in order (chain of command):

1. Head Coach or Advisor
2. Director of Athletics/Activities
3. Superintendent

**TRANSPORTATION:**

All students must travel to and from athletic contests/co-curricular events in a vehicle supervised by their coach/advisor or a designated chaperone. "To and from" is defined as travel from Glenwood City to the event site and back. Students may return home from an away contest with parents/guardians providing approval from the coaching/advising staff, and the appropriate waiver form has been signed. In such cases, the coaching/advising staff is responsible for ensuring that the student leaves the contest with his/her parent/guardian.

If a student must ride with a parent to a school-sponsored activity, the student must submit a written parental request to the director of athletics/activities at least one (1) school day prior to the event. Upon verification of the need, a document will be issued to the student AND the coach/advisor indicating the arrangements made for the event in question.

**AWARDS:**

**Varsity Letters** and appropriate pins will be distributed at the appropriate athletic banquet. Items will be awarded according to the criteria established by each sport's coaching staff and approved by the Director of Athletics. Each head coach will give the criteria to their athletes prior to the first varsity event.

**Individual Awards**/plaques will be distributed at the appropriate athletic banquet. Items will be awarded according to the criteria set up by each sport's coaching staff. Each head coach will give the criteria to their athletes prior to the first varsity event.

**Ten Letter Award** is provided to seniors who have earned ten or more varsity letters during their high school athletic career and have not had any athletic code violations.

**PARTICIPANT SATISFACTION SURVEY:**

The School District of Glenwood City is committed to offering the best possible experience to each of our students. After the completion of the season, participants will be provided an opportunity to complete a satisfaction survey regarding their experience; the survey is anonymous.

## **STUDENT ACCIDENT INSURANCE**

The School District of Glenwood City provides student accident insurance for all students in pre-school through grade twelve. This accident insurance is purchased from Student Assurance Service's Inc. (located in Stillwater, Minnesota), and provides coverage for the following activities:

- a. attending regular school sessions,
- b. participating in or attending school-sponsored and supervised extracurricular activities,
- c. participating in school-sponsored and supervised interscholastic sports, and
- d. traveling directly to and from school for regular school session; and while traveling to and from school sponsored and supervised extracurricular activities in school-provided transportation.

The Summary of Coverage (what the plan pays) and Optional 24-Hour Voluntary Coverage are available at the Student Assurance Service's website, [www.sas-mn.com](http://www.sas-mn.com) and can be found under K12 Students & Parents - Find my School.

**PLEASE BE ADVISED THAT THE COVERAGE THE SCHOOL DISTRICT IS PURCHASING IS A SUPPLEMENT TO YOUR FAMILY HEALTH INSURANCE.** It pays only after your family health or auto policy and then within the limits of

the policy's benefits (explanation within the summary of coverage). This plan does not cover penalties imposed for failure to use providers preferred or designated by your primary coverage.

### **CLAIM PROCEDURE**

Filing of the claim is the parent's responsibility.

1. Parents notify the school and obtain a claim form immediately. The school will fill out Part A if it's a school injury.
2. Parents complete Part B. Answer all questions.
3. Parents submit copies of your itemized bills to your own family insurance first, even if you have a large deductible. You will be sent a report called an Explanation of Benefits (EOB).
4. Parents send the claim form, copies of itemized bills and the EOB to:  
**STUDENT ASSURANCE SERVICES, INC.**

**PO BOX 196  
STILLWATER MN 55082**

5. The claim will be completed when all of the above documents have been provided. Should you have a question as to the status of a claim, you can contact Student Assurance Services, Inc. at (800) 328-2739, from 8:00 a.m. to 4:30 p.m. Central Time, Monday through Friday.

**NOTE:** Students must have been treated by a licensed physician within 60 days of the date of the injury. Proof of claim should be submitted within 90 days from the date of accident, or a reasonable time thereafter not to exceed one year. The company is responsible only for expenses incurred within one year from the date of injury

[www.sas-mn.com](http://www.sas-mn.com)

**INHOUSE/K-12 LTRS/Parent-Group LTR 23-24**

# **APPENDIX**



## ATHLETIC ELIGIBILITY CHECKLIST

This form is a resource for you and your son/daughter to ensure that all necessary documents have been submitted prior to participation in athletics. Students will not be allowed to practice without the items highlighted in BLUE are submitted to the Athletics' Office. Students will not be allowed to participate in contests until items highlighted in RED are submitted to the Athletics' Office.

☐

### **2024-2025 Athletics & Activities Permission Form**

Requires signature from student and parent/guardian.

☐

### **WIAA Athletic Physical Clearance Card**

Physicals must be updated every other year.

Or

### **WIAA Alternate Year Athletic Permit Card**

Alternate year cards must be submitted opposite the physical clearance card.

☐

### **Emergency Information Card**

This card provides coaching staff and district personnel with information that is helpful should a medical emergency occur during the course of competition or practice.

☐

### **Concussion Acknowledgement Form**

Student-athlete and parent/guardian signature sheet indicating awareness of symptoms of concussions and the steps to be followed if there is suspicion of sustaining a concussion.

☐

### **HIPAA Release**

Allows for protected health information to be shared between athletic trainers, director of athletics, game officials, school personnel and parents/guardians.

☐

### **ImPACT Test**

This test creates a baseline measure of brain activity and is referenced if a student-athlete was to suffer a concussion; the test must be taken a minimum of every two years.

☐

### **WIAA Concussion and Sudden Cardiac Arrest Acknowledgement**

Concussion and Head Injury Information Sheet and Sudden Cardiac Arrest Information sheets to be read. Parent and Athlete agreements need to be signed.

☐

### **Sport-Specific Meeting**

Attendance taken during sport meeting with coach. Coaches will provide student-athletes and parents/guardians with practice/game schedules, transportation schedules and team expectations.

For additional information or to access any of the above listed forms, please visit

[www.gcisd.k12.wi.us/athletics/](http://www.gcisd.k12.wi.us/athletics/)



## Athletics & Activities Permission Form

The Athlete & Co-Curricular Handbook is available by visiting the School District of Glenwood City's athletics' website at [www.gcsd.k12.wi.us/athletics/](http://www.gcsd.k12.wi.us/athletics/)

If you are unable to access the athletic & co-curricular handbook through the website, hard copies are available in the high/middle school office.

- I have read and understand the Athlete & Co-Curricular Handbook of Glenwood City High/Middle School.
- I agree to abide by the code and cooperate with the school in the enforcement of this code.
- I understand that a violation of any of the WIAA, national organizational policies or Glenwood City High/Middle School regulations will result in actions as stated.
- I am aware of the risks involved in extra-curricular participation (including paralysis or death) and give my/our consent for the student named below to participate in extra- and/or co-curricular activities sponsored by Glenwood City High/Middle School.
- I provide consent for my daughter/son to be provided with medical attention/care by the athletic trainer, physician, emergency medical technician or any other medically trained individual in case of an emergency.

Signature of Student \_\_\_\_\_

Printed Name of Student \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Printed Name of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

A signed copy of this form must be on file in the athletics' office for each academic year prior to participation in any high/middle school extra- or co-curricular activity.



## Emergency Contact Information

**Student Athlete Name:** \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

### Medical Information for Athlete:

Primary Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_ Phone: \_\_\_\_\_

Primary Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Insurance Provider: \_\_\_\_\_

Policy #: \_\_\_\_\_

Dental Insurance Provider: \_\_\_\_\_

Policy #: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medical Conditions \_\_\_\_\_

Medication: \_\_\_\_\_ Purpose: \_\_\_\_\_

Medication: \_\_\_\_\_ Purpose: \_\_\_\_\_



## Concussion Acknowledgement Form

**It is important for parents/guardians and athletes to recognize the signs, symptoms, and behaviors associated with concussions.** By signing this form, you are stating that you understand the importance of recognizing and responding to the signs, symptoms, and behaviors of a concussion or head injury.

### Parent Agreement:

I \_\_\_\_\_ (PRINT NAME) have read the Parent Concussion and Head Injury Information and understand what a concussion is and how it may be caused. I also understand the common signs, symptoms, and behaviors. I agree that my child must be removed from practice/play if a concussion is suspected.

I understand that it is my responsibility to seek medical treatment if a suspected concussion is reported to me.

I understand that my child cannot return to practice/play until providing written clearance from an appropriate health care provider to his/her coach/athletic trainer.

I understand the possible consequences of my child returning to practice/play too soon.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

### Athlete Agreement:

I \_\_\_\_\_ (PRINT NAME) have read the Parent Concussion and Head Injury Information and understand what a concussion is and how it may be caused. I understand the importance of reporting a suspected concussion to my coaches and my parents/guardians. I understand that I must be removed from practice/play if a concussion is suspected.

I understand that I must provide written clearance from an appropriate health care provider to my coach/athletic trainer before returning to practice/play.

I understand the possible consequence of returning to practice/play too soon and that my brain needs time to heal.

Signature of Student-Athlete \_\_\_\_\_ Date \_\_\_\_\_



***Authorization to Disclose  
Protected Health Information  
Sports Medicine***

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) limits disclosures of protected health information (PHI). PHI is any information, including demographics, whether oral, electronic, or paper, which is created or received by a health care provider and relates to your healthcare or payment for the provision of health care.

Mayo Clinic Health System Sports Medicine personnel (physicians, advanced care providers, athletic trainers, nurses, dietitians, and physical therapists) are present at many athletic practices and events. In their role in ensuring the continuum of care for the student athletes, they may need to relate student athletes' PHI to coaches, game officials, athletic department personnel, and parents (authorization required for disclosure to parents, if student athlete is 18 years of age or older). Mayo Clinic Health System Sports Medicine requires this written authorization for the purpose of these disclosures.

I authorize Mayo Clinic Health System Sports Medicine personnel to verbally disclose to my coaches, athletic directors, game officials, athletic department, and school personnel, and my parents, any of my PHI that may affect my participation status for interscholastic/collegiate sports. This includes, but is not limited to, information about my past injuries or illnesses and injuries or illnesses that I may suffer during the recommended restrictions for those injuries or illnesses.

This authorization is valid for 12 months. I understand that I have the right to revoke this authorization in writing. Written revocation should be sent to Privacy Officer, Mayo Clinic Health System, Health Information Services. I understand that the revocation will not apply to information that has already been released prior to the written notification. I understand that Mayo Clinic Health System will not condition treatment on whether I sign this authorization. I understand that authorizing the discloser of this PHI is voluntary and I may refuse to sign this authorization. Information used or disclosed pursuant to this authorization may be subject to re-disclosure by the recipient and may no longer be protected by HIPAA. A copy of this authorization is as valid as the original.

Student Athlete's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

High School Name: \_\_\_\_\_

Involved Sport(s): \_\_\_\_\_

Student Athlete's Signature: \_\_\_\_\_

Parent or Legal Representative: \_\_\_\_\_ Date: \_\_\_\_\_  
(parent must sign if athlete is under 18 years of age)

## PARENT AGREEMENT

As a parent/guardian and as an athlete it is important to recognize the signs, symptoms, and behaviors of concussions and sudden cardiac arrest. By signing this form, you are stating that you have read the Department of Public Instruction's (DPI) and the Wisconsin Interscholastic Athletic Association (WIAA) Concussion and Head Injury information sheet and Sudden Cardiac Arrest Information sheet.

### Parent Agreement:

I, \_\_\_\_\_ have read the DPI's Concussion and Head Injury Information sheet. I have had the opportunity to read more information about concussions on the Centers for Disease Control and Prevention's (CDC) websites. I understand what a concussion is and how it may be caused. I also understand the common signs, symptoms, and behaviors. I agree that my child must be removed from practice/play if a concussion is suspected.

I understand that it is my responsibility to seek medical treatment if a suspected concussion is reported to me. I understand that my child cannot return to practice/play until they are evaluated by an appropriate health care provider and provide written clearance from the health care provider to their coach.

I understand concussions can have a serious effect on a young, developing brain and need to be addressed correctly.

I have read the Sudden Cardiac Arrest information sheet. I understand that my child should stop activity/exercise immediately if they have any warning signs of sudden cardiac arrest. I understand it is recommended if my child has any warning signs of sudden cardiac arrest while exercising, they have a medical examination before exercising or returning to participation in their sport. I understand that I or my child should report a family history of heart problems or warning signs of sudden cardiac arrest to the healthcare provider doing the medical examination.

I understand how to request at my cost the administration of an electrocardiogram, in addition to a comprehensive physical examination required to participate in a youth athletic activity. I understand the athletic director may be able to assist me.

\_\_\_\_\_  
Parent/Guardian Signature

Date \_\_\_\_\_

## ATHLETE AGREEMENT

As a parent/guardian and as an athlete it is important to recognize the signs, symptoms, and behaviors of concussions and sudden cardiac arrest. By signing this form, you are stating that you have read the Department of Public Instruction's (DPI) and the Wisconsin Interscholastic Athletic Association (WIAA) Concussion and Head Injury information sheet and Sudden Cardiac Arrest Information sheet.

### Athlete Agreement:

I, \_\_\_\_\_ have read the Concussion and Head Injury Information sheet. I have had the opportunity to read more information on concussions on the Centers for Disease Control and Prevention's (CDC) websites. I understand what a concussion is and how it may be caused. I also understand the common signs, symptoms, and behaviors. I understand the importance of reporting a suspected concussion to my coaches and my parents/guardian.

I understand that I must be removed from practice/play if a concussion is suspected. I understand that I must be evaluated by an appropriate health care provider and provide to my coach written clearance to participate in the activity from the health care provider before I may return to practice/play.

I understand that after a head injury my brain needs time to heal and that it may not heal properly if I return to practice/play too soon.

I have read the Sudden Cardiac Arrest Information sheet. I understand that I should stop activity/exercise immediately if I have any warning signs of sudden cardiac arrest and report the symptoms to my coaches and my parents/guardians.

\_\_\_\_\_  
**Athlete Signature**

Date \_\_\_\_\_