



2016 – 2017 FHS Athletics Clearance Information

Athletic Office (760) 723-6300 ext. 3610

Anyone interested in playing Football - athletic packets are due 6/10/16 Per Football Program Rules
Clearance is mandatory prior to beginning Summer Camp. **NO EXCEPTIONS**

Packet Deadline: Fall Sports: 7/11/2016

Practice can begin Monday 8/1/2016

Winter Sports: 11/6/15

Practice can begin Saturday 11/12/2016

Spring Sports: 2/5/16

Practice/tryouts for B Tennis/G/B Swim 2/16/2016

Practice/tryouts can begin Saturday 2/20/2016

Try-Outs: Information will be posted on athletic bulletin board and windows in the lobby area of the gym.

RETURN YOUR COMPLETED PACKET TO ATHLETIC OFFICE ONLY

The Athletic Office is located in the lobby area of the gymnasium. **DO NOT** mail packet, give to a coach, school employee or place in a coach's mailbox.

CHECK LIST: Packets missing items will not be cleared

- Copy of your medical insurance card required as proof of insurance.**
- Incoming Frosh and new students** must provide a copy of final report card to clear for sports teams
- Transfer Students/Exchange Students new to FUHS** must meet with the Athletic Secretary to process the CIF forms
- Physical completed and signed by doctor and parent/guardian
- Signed and completed Athletic Clearance Form
- Signed and completed FHS Emergency Release Form
- Signed CIF Code of Ethics
- Signed Residence Form
- Signed FHS Athlete/Parent Agreement
- Signed Conditions of Participation Use Form

Academic Eligibility: June grades will determine Fall sport academic eligibility for everyone. Freshman and students new to FHS must include a copy of final report card with the athletic packet. CIF rules require that each student maintain a 2.0 GPA in order to compete in interscholastic sports, and no more than 1 "F" in the previous grading period. Students with two or more "F"s are ineligible to compete until the next grading period. Retaking a failed class in Summer School or in an Alternative Credit Class may change your yearend grades for Fall Sports.

Transportation Fees 1st Sport - \$75.00, 2nd Sport - \$50.00, 3rd Sport - \$25.00

REMINDER: UNPAID athletic debts remain on student's account and will prevent registration and graduation clearance. Fees are paid at the ASB Office located underneath the cafeteria.



Fallbrook High Athletics



Pursuing VICTORY with HONOR

Dear Parents of Student Athletes,

Prior to your student participating in school athletic activities, the Education Code requires your student have insurance that will cover him/her should they be injured during such activities. Fallbrook Union High School does not provide the required medical coverage for its athletes.

Under state law, school districts are required to ensure that all members of school athletic teams have accidental injury insurance that covers medical and hospital expenses. The insurance requirement can be met by the school district offering insurance or other health benefits that cover medical and hospital expenses (Education code Section 32221.5). Some pupils may qualify to enroll in no-cost or low-cost local, state, or federally sponsored health insurance programs.

If your student is not insured and you do not qualify for the above programs, the school office can furnish you with an application for medical coverage through an independent company, Myers Stevens & Toohey. Or you can register online at <https://myers-stevens.com/enrollment-page/>. All costs for such insurance coverage will be the sole responsibility of the parent or responsible guardian.

You will be required to provide a copy of your **student's medical insurance card** or other proof of medical coverage before your student will be allowed to compete for Fallbrook Union High School. You will also be required to notify Fallbrook Union High School of any changes or lapse in your policy while your student is actively involved in the sports program.

Respectfully,

Patrick Walker
Athletic Director
Fallbrook Union High School



Fallbrook High Athletics

Academic Eligibility Policy

- **June grades** will determine **Fall sport academic eligibility for ALL students** including incoming freshmen & students new to Fallbrook High School.
- Students must maintain a grade point average of “C” (2.0) or better in order to participate in Athletics.
- Academic eligibility will be checked at progress report and report card times. **The grades issued on each progress report or report card are the only grades that can be used to determine an athlete’s eligibility.**
- Summer School or Alternative Credits will be used in the following manner. If you retake a class the following grading period your new class grade will count as your final grade for that period. If you retake a class and pass or improve your grade at a later date, that class will be used to improve your overall GPA and your last grading period.
- If the student athlete’s grade point average is below 2.0 and no more than one “F”, students may use a probationary period. Students on probation must continue to raise their grades to the minimum standard in order to stay active in athletics. Participation during this time is at the discretion of the coaching staff.
- Any time after a period of probation if a student is unsuccessful in bringing his/her grades up to the 2.0 standard, he/she will be ineligible for athletics for the remainder of that sports season.
- Only ONE probationary period may be used per season of sport.
- Students with two or more “F”s” during any grading period are **not eligible to compete in any contest during that grading period**. They may remain on the roster at the coaches discretion.
- An Incomplete or No Mark grade shall not be considered a passing grade: it counts as an “F”. When an incomplete grade has been confirmed and a passing grade has been substituted for the incomplete grade, the athlete will be reevaluated for his/her eligibility.



Fallbrook High Athletics

Student Nondiscrimination and Sexual Harassment Policy

NOTICE OF STUDENT NONDISCRIMINATION Fallbrook Union High School District is committed to equal opportunity for all individuals in education. District programs and activities shall be free from discrimination by reason of the following actual or perceived characteristics: actual or perceived sex, sexual orientation, gender, gender identity, gender expression, ethnic group identification, race, ancestry, national origin, religion, color and mental or physical disability, nationality, age, creed, or marital status, or on the basis of a person's association with a person or group with one or more of these actual or perceived characteristics. Discrimination is also prohibited based on a student's actual or perceived potential parental, family, or marital status.

Students who violate this policy may be subject to discipline, up to and including expulsion, in accordance with district policy, administrative procedure and state law.

Employees who violate this policy shall be subject to discipline up to and including dismissal. Any disciplinary action shall be in accordance with applicable federal, state and/or collective bargaining agreements.

STUDENT SEXUAL HARASSMENT POLICY Fallbrook Union High School District is committed to making the schools free from sexual harassment and discrimination. Sexual harassment is a form of sex discrimination under Title IX of the Education Amendments of the Civil Rights Act of 1972 and is prohibited by both federal and state laws. The district prohibits sexual harassment of students by other students, employees or other persons, at school or at school-sponsored or school related activities. Sexual harassment is defined in Education Code to mean unwelcome sexual advances; requests for sexual favors; or verbal, visual, or physical conduct of a sexual nature, made by someone from or in the educational setting. The superintendent or his/her designee shall ensure that district students receive age-appropriate instruction about their rights to be free from sexual harassment, the district procedure for reporting and investigating complaints of sexual

harassment including with whom a complaint should be filed.

The district prohibits conduct that has the purpose or effect of having a negative impact on the individual's work or academic performance, or that is sufficiently severe, persistent, or pervasive to create an intimidating, hostile, or offensive educational environment.

The district further prohibits sexual harassment that conditions a student's status, progress, benefits, services, honors, program or activities based on submission to such conduct

Any student who feels that he/she is being, or has been, sexually harassed by a school employee, another student, or a non-school employee at school or at a school-related event, shall immediately contact his/her teacher or any other district employee. An employee who receives such a complaint shall report it in accordance with administrative procedures.

Employees who violate this policy shall be subject to discipline up to and including dismissal. Any disciplinary action shall be in accordance with applicable federal and state laws and/or collective bargaining agreements.

Students who violate this policy may be subject to discipline, up to and including expulsion, in accordance with district policy, administrative procedure and state law.

The district believes that it can resolve issues of harassment and discrimination at the school site.

F. H. S. ATHLETICS – Sport Clearance Form

5/5/16

FALL (check all you may be interested in)		WINTER (check all you may be interested in)		SPRING (check all you may be interested in)	
<input type="checkbox"/> B/G Cross Country	<input type="checkbox"/> G/Golf	<input type="checkbox"/> B/Blktbal	<input type="checkbox"/> G/H20polo	<input type="checkbox"/> B/G Swim	<input type="checkbox"/> B/G Track
<input type="checkbox"/> Football	<input type="checkbox"/> G/Volleyball	<input type="checkbox"/> Wrestling	<input type="checkbox"/> G/Soccer	<input type="checkbox"/> B/Volleyball	<input type="checkbox"/> Baseball
<input type="checkbox"/> B/H20polo	<input type="checkbox"/> Field Hockey	<input type="checkbox"/> B/Soccer	<input type="checkbox"/> G/Bktball	<input type="checkbox"/> Softball	<input type="checkbox"/> B/Tennis
<input type="checkbox"/> Cheer	<input type="checkbox"/> G/Tennis			<input type="checkbox"/> B/Golf	<input type="checkbox"/> Gymnastics
<input type="checkbox"/> Marching Band		<input type="checkbox"/> Club Rugby		<input type="checkbox"/> B/G Lacrosse	

Student's Legal Name _____ Student # _____ Birth date _____ Grade _____ Sex _____

Present Address _____ City _____ Zip Code _____ Home Phone #/Cell # _____

Parent / Guardian Name: _____ Cell Phone # _____ Work # _____

STUDENT LIVES WITH: Both Parents Natural Mother Natural Father Custodial Parents Foster Parents Court Appointed Guardian Caregiver

INCOMING 9TH GRADER? No Yes (a copy of your final 8th grade report card is required for clearance)

INTERDISTRICT TRANSFER? No Yes (A copy of an approved transfer must be attached)

TRANSFER STUDENT? No Yes-Previous school: (name, city, state & phone) _____

If yes, list previous sports (all levels) _____
(A copy of transcript and last report card issued and you must meet with the Athletic office to obtain the required CIF clearance)

COPY OF INSURANCE CARD REQUIRED FOR CLEARANCE - INSURANCE REQUIREMENTS: Fallbrook Union High School does not provide the required medical coverage for its athletes. If your student is not insured, the school office can furnish you with an application for medical coverage through an independent company. All costs for such insurance coverage will be the sole responsibility of the parent or responsible guardian.

PARENT/GUARDIAN'S CONSENT:

I authorize the use/disclosure of health (medical) information in regards to my son/daughter to the following persons: FHS Principal, FHS AthleticTrainer, Athletic Director, Athletic Secretary, FHS School Nurse, and the coaching staff of the above listed sports. I understand that if I refuse to sign, my son or daughter will not be able to participate in athletics at Fallbrook High School.

In the event of an accident or emergency, I give my permission for the school authorities to transport my child to any available doctor or hospital and/or request their services.

I hereby certify that the above-named student is covered by health /accident insurance which provides protection for accidental bodily injury as required by California State Law and Ed. Code for participation in an approved school activity during the school year. I will notify Fallbrook Union High School of any change or lapse in the policy stated below.

I hereby certify that the above named student was given a general physical examination and based on that examination, no illness or Impairments were found to my knowledge which would prevent him/her from engaging in the FUHS athletic program. I have read and completed the athletic clearance form and certify to the best of my knowledge all the information that I have provided is correct.

Signature of Parent/ Guardian indicates agreement with ALL of the above items in Parent/Guardian's consent.

I have read and understand the FUHS Conduct Code and CIF Academic Eligibility Standards (Not less than a 2.0 "C" GPA & no more than 1 "F" in previous grading period or progress report, at least 20.0 semester credits earned in previous grading period. I will comply with these standards and accept my responsibility as a student athlete.

Student Signature _____ Date _____

F. H. S. ATHLETICS - Emergency Release Form

5/5/16

Make sure all copies are legible. <u>Please be aware you may be asked to complete this emergency form again if you play another sport.</u>	WINTER <input type="checkbox"/> B/Blktbal <input type="checkbox"/> G/H20polo <input type="checkbox"/> Wrestling <input type="checkbox"/> G/Soccer <input type="checkbox"/> B/Soccer <input type="checkbox"/> G/Bktball <input type="checkbox"/> B/G Club Rugby	SPRING (check all you may be interested in) <input type="checkbox"/> B/G Swim <input type="checkbox"/> B/G Track <input type="checkbox"/> B/Volleyball <input type="checkbox"/> Baseball <input type="checkbox"/> Softball <input type="checkbox"/> B/Tennis <input type="checkbox"/> B/Golf <input type="checkbox"/> Gymnastics <input type="checkbox"/> B/G Lacrosse
	<input type="checkbox"/> 55/5 FALL <input type="checkbox"/> B/G Cross Country <input type="checkbox"/> G/Golf <input type="checkbox"/> Football <input type="checkbox"/> G/Volleyball <input type="checkbox"/> B/H20polo <input type="checkbox"/> Field Hockey <input type="checkbox"/> Cheer <input type="checkbox"/> G/Tennis	

General Information

Student's Legal Name _____ Student # _____ Birthdate _____ Grade _____ Sex _____

Present Address _____ City _____ Zip _____

Students E- Mail Address _____ Parents E-mail Address _____ Students Cell # _____

(#1) Emergency Contact & Phone # _____ (#2) Emergency Contact & Phone # _____

Father's Name & Home # _____ Mother's Name & Home # _____

Cell # _____ Work # _____ Cell # _____ Work # _____

Medical / Insurance Information

Insurance Provider & Policy # _____ Insured employer _____

Family physician & Phone # _____ Existing medical conditions (medications-allergies-bee stings) _____

MEDICAL HISTORY

YES	NO	Don't know	Questions
			1. Are you aware of any health problems?
			2. Does the athlete take any medication?
			3. Is athlete currently under medical care?
			4. Does the athlete have any problems with vision (eyes)?
			5. Has the athlete ever suffered a heart related illness (heat stroke)?
			6. Does the athlete have a history of a concussion (getting knocked out)?
			7. Does athlete have asthma (wheezing), hay fever or coughing spells after exercise?
			8. Has the athlete ever broken a bone, had to wear a cast or had an injury to any joint?
			9. Has it ever been necessary to restrict athlete's activities for medical reasons?
			10. Does athlete require special care for any reason?
			11. Has the athlete ever had any surgeries?
			12. Is the athlete diabetic?

Explain any YES answers (Attach additional page if necessary)

PARENT'S STATEMENT

I hereby give my consent for the above named student to compete in sports, including regularly scheduled trips to other schools on supervised school transportation and I certify that the insurance information provided is accurate. **Risk Warning:** I realize that participating in competitive athletics may result in severe injury, including paralysis or death. It is understood FUHSD, FHS student body and or any FUHSD employees shares NO responsibility in the payment of medical fees incurred by injuries to participants in its athletic programs. **Trainer Consent:** I give my permission to the athletic trainer or other district personnel to administer first aid, follow-up treatment and rehabilitation when appropriate in his or her professional judgment as approved by the consulting physician. **Emergency Treatment:** In the event of an accident or emergency, I give my permission for the school authorities to transport my child to any available doctor or hospital or request their services.

Parent / Guardian Signature _____ Date _____

NO STUDENT WILL BE ALLOWED TO SELF TRANSPORT DURING THE NORMAL SCHOOL WEEK TO AN ATHLETIC CONTEST. NO STUDENT WILL BE ALLOWED TO TRANSPORT ANOTHER STUDENT UNDER ANY CIRCUMSTANCES TO/ FROM ANY ATHLETIC EVENT.

Provision for Transportation by parent:

This release form is to be signed and turned in with the FHS Athletic Clearance Forms: Parent/Guardian may transport his/her student from a Fallbrook High School athletic activity anytime during the sports season **provided they have cleared it with the Athletic Office and his/her coaches 24 Hrs prior to the contest.**

Name of Student _____ Student ID# _____

- I understand the Fallbrook Union High School District may be providing transportation to and from athletic contests. However, there may be times when I may want to transport my student before or after a sports contest. Therefore, I release Fallbrook Union High School District/FUHSD employees from any legal responsibility for my student when I wish to provide transportation.
- I also understand that I am not allowed to transport any other student to or from an athletic contest.

Parent/Guardian signature

Home Phone #

Work Phone#

Cell Phone #

PLEASE READ: Commitment to your sport(s) is expected from ALL athletes and their parents/guardians. Be aware that tournaments, practices, games continue during summer, Thanksgiving week, Christmas Vacation, Spring Break & other school holidays. ALL athletes are required to attend team meetings, practices, games and tournaments unless illness or emergency situations arise. **If an absence is anticipated for any reason it is always the athlete’s responsibility to communicate with the coaching staff prior to the absence.**

STUDENT’S AGREEMENT:

As a student athlete I agree to participate under the stated requirements below, and fully understand the risk of serious injury to myself as a result of participation.

Team Responsibility

- I understand that I must attend four classes on the day of a contest in order to compete. (Confirmed by attendance office & reported to AD).
- I understand all students have the right to attend a school that is safe and conducive to learning, therefore any student found to be **bullying, hazing, or harassing** another student will receive disciplinary consequences--up to and including expulsion from the Fallbrook Union High School District. Bullying via any electronic means constitutes grounds for suspension or expulsion.
- I will not participate in any form of bullying, hazing, harassing, fighting, pranks and/or horseplay resulting in injury to a student or damage to school property.
- I understand possession, use, sale, furnishing or being under the influence of alcohol, drugs or any controlled substance will also result in disciplinary consequences--up to and including expulsion from the Fallbrook Union High School District.
- I must be on my best behavior at all contests, bus rides, anywhere I am representing FHS.

Financial Responsibility

- I am responsible for and must pay an athletic transportation fee as designated by FHS.
- I am financially responsible for ALL uniforms & athletic equipment issued to me and will pay for lost or damaged items.
- Unpaid transportation, equipment & uniforms not returned will remain as athletic debts on my account and will prevent transfer to next sport, registration and or graduation

Academic Eligibility

- I must maintain a grade point average of 2.0 or better.
- I understand grades will be checked every grading period. Progress report grades and semester grades will be used to check for eligibility
- I understand that Summer School or Alternative Credits will be used in the following manner. If you retake a class the following grading period your new classes grade will count as your final grade for that period. If you retake a class and pass or improve your grade at a later date, that class will be used to improve your overall GPA and your last grading period only.
- I understand if I receive 2 or more “F’s” during ANY grading period I’m automatically ineligible for competition and may be removed at the coaches discretion.
- I understand only ONE probationary period can be used per sport.
- I understand “Incomplete” & “No Marks” on (progress reports & semester grades) will be considered “F’s” (and may be ineligible to participate in athletics) until a grade is officially posted.

Athlete’ signature: _____ **Date:** _____

PARENT’S AGREEMENT:

We, the parents/or legal guardians have read the FHS Student Athlete/Parent/Guardian Agreement and concur that my child is subject to all FHS & FUHSD team, financial and academic eligibility requirements; as well as San Diego CIF Section extra-curricular code of conduct rules. We understand that we are financially responsible for any items lost, stolen or damaged by my child.

Signature of Parent/Guardian _____ **Date:** _____

**Fallbrook Union High School
Athletic Department**

RESIDENCY VERIFICATION

Athletic / Extracurricular Participation

Athlete's Printed Name: _____ **Sex:** _____ **Grade:** _____

1. I am the: (check one)

- Parent Legal Guardian Relative
 Caretaker Foster parent Emancipated Minor

2. PREVIOUS HIGH SCHOOL ATTENDED (if applicable)

School _____ City _____

3. PREVIOUS HIGH SCHOOL SPORTS & LEVEL: (Varsity, JV, Frosh)

Sport	Level
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Sport	Level
-------	-------

4. Student Status: (Check one) Current Student of Fallbrook District
 New Resident Administrative Placement
 Inter-District Transfer Intra District Transfer(within district)

5. I AFFIRM THAT THIS STUDENT RESIDES AT THE FOLLOWING ADDRESS:

Street Address	Apt. No./Unit
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City	State	Zip Code
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6. PARENTS RESIDENCE:

Street Address	Apt. No./Unit
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City	State	Zip Code
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7. I understand that this street address is within Fallbrook Union High School District boundaries and/or I have followed the district transfer procedures. I also understand that falsifying this information will cause team forfeiture and immediate ineligibility.

Signature of Person Checked on Line 1	Date
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Fallbrook High Athletics

Conditions of Participation Concerning Androgenic/Anabolic Steroid Use

Name of Student-Athlete _____

As a condition of membership in the CIF, all schools shall adopt policies prohibiting the use and abuse of androgenic/anabolic steroids. All member schools shall have participating students and their parents, legal guardian/caregiver agree that the athlete will not use steroids without the written prescription of a fully licensed physician (as recognized by the AMA) to treat a medical condition (Bylaw 524).

By signing below, both the participating student-athlete and the parents, legal guardian/caregiver hereby agree that the student shall not use androgenic/anabolic steroids without the written prescription of a fully licensed physician (as recognized by the AMA) to treat a medical condition. We also recognize that the under CIF Bylaw 200.D, there could be penalties for false or fraudulent information. We also understand that the (Fallbrook High School/Fallbrook Union High School District) policy regarding the use of illegal drugs will be enforced for any violations of these rules.

Signature of the Athlete

Date

Signature of Parent/Guardian/Caregiver

Date



CIF-San Diego Section
 2131 Pan American Plaza
 San Diego, CA 92101
 Phone 858-292-8165
 Fax 858-292-1375
 www.cifsd.org

ETHICS IN SPORTS (ATHLETE-PARENT/GUARDIAN/CAREGIVER) – 2016-17
(Revised 3/09)

I. POLICY STATEMENT

- It is the mission of the California Interscholastic Federation, San Diego Section (CIFSDS) to promote high standards of sportsmanlike and ethical behavior in and around athletic contests played under its sanction and, in life, in general. Citizenship, Integrity, and Fairness are embodied in that mission. CIF and CIFSDS contests must be safe, courteous, fair, controlled, and orderly for the benefit of all athletes, coaches, officials, and spectators, and behavior by all involved at all times should manifest the highest standards of conduct.
- It is the intent of the section membership that poor sportsmanship, unethical behavior, and violence, in any form, will not be tolerated in athletic contests or practices. In order to enforce this policy, the membership, through its Board of Managers, has established rules and regulations.
- Coaches assume the responsibility to teach and demand high standards of conduct of their athletes both on the field of play and in everyday life, in season and out of season.
- It is the school principal's responsibility to enforce all CIFSDS rules and regulations and to demand high standards of conduct from coaches, athletes, parents/guardians, and spectators. The principal shall demand strict adherence to all the CIF State and CIFSDS rules, regulations, and procedures.
- **Participation in interscholastic athletics and section playoffs is a privilege.**
- The CIFSDS Board of Managers requires that the following Code of Ethics be issued to and signed by each student-athlete, parent, coach, and officials' association. Penalties for failure to submit a signed Code of Ethics are:

1. Athlete	Ineligibility for participation in CIF-San Diego Section athletics
2. Coach	Restricted from coaching in CIF-San Diego Section contests
3. Officials Association	Not approved to officiate in the CIF-San Diego Section
4. Parent	Prohibition/Removal from attendance at CIF or CIFSDS event
- **Failure to abide by the standards of behavior as agreed will result in a penalty up to and including disqualification to participate.**

II. CODE OF ETHICS FOR STUDENT-ATHLETE, PARENT/GUARDIAN/CAREGIVER, COACH, CONTEST OFFICIAL

- A. Comply with the six pillars and 16 Principles of the Pursuing Victory with Honor program (on reverse side).
- B. Be courteous at all times with school officials, opponents, game officials, and spectators.
- C. Exercise self-control.
- D. Know all rules of the contest, of CIF State, and the CIFSDS and agree to follow the rules.
- E. Show respect for self, players, officials, coaches, and spectators.
- F. Refrain from the use of foul and/or abusive language at all times.
- G. Respect the integrity and judgment of game officials.
- H. An athletic director, sports coach, school official or employee or booster club/sport group member may not provide any muscle-building nutritional supplements to student-athletes at any time. A school may only accept an advertisement, sponsor, or donation from a supplement manufacturer that offers only non-muscle building nutritional supplements. A school may not accept an advertisement sponsorship or donation from a distributor of a dietary supplement whose name appears on the label. Permissible non-muscle building nutritional supplements are identified according to the following classes: Carbohydrate/electrolyte drinks; energy bars, carbohydrate boosters, and vitamins and minerals. (Revised - Federated Council May 2007.)
- I. **Win with character; lose with dignity.**

Accept consequences of conduct deemed inappropriate or in violation of rules.

I have read, understand, and accept the Policy Statement, Code of Ethics, The Pillars and Principles of Pursuing Victory with Honor, and the Violations, Minimum Penalties, and Appeal Process (on attached page) of the CIF-San Diego Section **ETHICS IN SPORTS** Policy. I agree to abide by this policy while participating and/or being a spectator at CIFSDS athletic events regardless of contest site or jurisdiction.

 Signature – Athlete

 Printed Name

 Date

 Signature – Parent/Guardian/Caregiver

 Printed Name

 Date

PURSUING VICTORY WITH HONOR

SIX PILLARS OF CHARACTER

TRUSTWORTHINESS

RESPECT

RESPONSIBILITY

FAIRNESS

CARING

GOOD CITIZENSHIP

SIXTEEN PRINCIPLES OF PURSUING VICTORY WITH HONOR

1. The essential elements of character building and ethics in CIF sports are embodied in the concept of sportsmanship and six core principles: trustworthiness, respect, responsibility, fairness, caring, and good citizenship. The highest potential of sports is achieved when competition reflects these "six pillars of character."
2. It's the duty of School Boards, superintendents, school administrators, parents, and school sports leadership - including coaches, athletic administrators, program directors, and game officials - to promote sportsmanship and foster good character by teaching, enforcing, advocating, and modeling these "six pillars of character."
3. To promote sportsmanship and foster the development of good character, school sports programs must be conducted in a manner that enhances the academic, emotional, social, physical, and ethical development of student-athletes and teaches them positive life skills that will help them become personally successful and socially responsible.
4. Participation in school sports programs is a privilege, not a right. To earn that privilege, student-athletes must abide by the rules, and they must conduct themselves, on and off the field, as positive role models who exemplify good character.
5. School Boards, superintendents, school administrators, parents, and school sports leadership shall establish standards for participation by adopting and enforcing codes of conduct for coaches, athletes, parents, and spectators.
6. All participants in high school sports must consistently demonstrate and demand scrupulous integrity and observe and enforce the spirit as well as the letter of the rules.
7. The importance of character, ethics, and sportsmanship should be emphasized in all communications directed to student-athletes and their parents.
8. School Boards, superintendents, school administrators, parents, and school sports leadership must ensure that the first priority of their student-athletes is a serious commitment to getting an education and developing the academic skills and character to succeed.
9. School Boards, superintendents, principals, school administrators, and everyone involved at any level of governance in the CIF must maintain ultimate responsibility for the quality and integrity of CIF programs. Such individuals must assure that education and character development responsibilities are not compromised to achieve sports performance goals and that the academic, social, emotional, physical, and ethical well-being of student-athletes is always placed above desires and pressure to win.
10. All employees of member schools must be directly involved and committed to the academic success of student-athletes and the character-building goals of the school.
11. Everyone involved in competition including parents, spectators, associated student body leaders, and all auxiliary groups have a duty to honor the traditions of the sport and to treat other participants with respect. Coaches have a special responsibility to model respectful behavior and the duty to demand that their student-athletes refrain from disrespectful conduct including verbal abuse of opponents and officials, profane or belligerent trash-talking, taunting, and inappropriate celebrations.
12. School Boards, superintendents, and school administrators of CIF member schools must ensure that coaches, whether paid or voluntary, are competent to coach. Training or experience may determine minimal competence. These competencies include basic knowledge of: 1) The character building aspects of sports, including techniques and methods of teaching and reinforcing the core values comprising sportsmanship and good character. 2) The physical capabilities and limitations of the age group coached as well as first aid and CPR. 3) Coaching principles and the rules and strategies of the sport.
13. Because of the powerful potential of sports as a vehicle for positive personal growth, a broad spectrum of school sports experiences should be made available to all of our diverse communities.
14. To safeguard the health of athletes and the integrity of the sport, school sports programs must actively prohibit the use of alcohol, tobacco, drugs, and performance-enhancing substances, as well as demand compliance with all laws and regulations, including those related to gambling and the use of drugs.
15. Schools that offer athletic programs must safeguard the integrity of their programs. Commercial relationships should be continually monitored to ensure against inappropriate exploitation of the school's name or reputation. There should be no undue interference or influence of commercial interests. In addition, sports programs must be prudent, avoiding undue financial dependency on particular companies or sponsors.
16. The profession of coaching is a profession of teaching. In addition to teaching the mental and physical dimension of their sport, coaches, through words and example, must also strive to build the character of their athletes by teaching them to be trustworthy, respectful, responsible, fair, caring, and good citizens.

VIOLATIONS, MINIMUM PENALTIES, AND APPEAL PROCESS

(Applicable to players and coaches from time of departure for contest until time of return.)

ACT

1. Behavior resulting in ejection of athlete or coach from contest
2. Illegal participation in next contest by athlete ejected from previous contest.
3. Second ejection of athlete or coach from any contest during one season.
4. When an athlete leaves the bench area or fielding position to begin a confrontation or leaves the bench area or fielding position to join an altercation.
5. When more than two athletes leave the bench area or fielding position to begin a confrontation or leave the bench area or fielding position to join an altercation.
6. Other acts committed by individuals or teams or acts committed at end of season.
7. Use of an ineligible player in a contest.

MINIMUM PENALTIES*

EJECTION POLICY:

Any coach, team attendant, or spectator ejected by a contest official from any contest for any reason, at any level, is suspended indefinitely from participation, practice, or attending (site and sound) any sports contest, until the first of the following occurs: the ejected person serves the tentative penalty recommended by the commissioner; or a meeting is held among the school administration, coach, player, and custodial parent(s)/guardian(s) with CIFSDS staff member(s) to discuss and impose an appropriate penalty which is served before participation resumes.

Any player ejected by a contest official from any contest for any reason is suspended from participation in the next contest(s) until the tentative penalty recommended by the commissioner is served; or a meeting is held among the school administration, coach, player, and custodial parent(s)/guardian(s) with CIFSDS staff member(s) to discuss and impose an appropriate penalty which is served before participation resumes. **Players are permitted to practice with the team and attend contests, but not in game uniform, during the period of suspension. (Approved June 3, 2008, Board of Managers).** Meetings will be scheduled at a time to be announced. There is no appeal of the Commissioner's decision. Telephonic and electronic meetings are not permitted.

Additionally, any person ejected (coach, player, spectator) is required to attend a CIFSDS Ethics In Sports Sportsmanship Meeting, which will be held at a time to be announced. Failure to attend the sportsmanship meeting will result in immediate suspension of athletic eligibility or attendance (site and sound) at contests or practices until such time as the ejected person attends a Sportsmanship Meeting. (Approved June 7, 2005, Board of Managers).

Ineligibility for remainder of season for athlete. A written appeal may be made by the individual or school to the commissioner.

A coach, who permits participation by a player ejected from a previous contest, knowingly violates a CIF or San Diego Section rule, and penalty may include a sanction to the school, coach, or suspension of membership.

Ineligibility of athlete for remainder of season or suspension of coach for remainder of season. A written appeal may be made by the school principal within two school days to the commissioner for reduction of penalty. Official to make report by the next school day to the commissioner.

Ejection from the contest for those designated by the official, ineligibility for the next contest, probation for remainder of season. Those players involved are later identified, ineligible for next contest and probation for remainder of season. A written appeal may be made by the individual(s) or school to the commissioner. Official to make report by the next school day to the commissioner.

A similar infraction of this act by the same athlete(s) during the same season will result in termination of the season for the athlete(s) concerned. A written appeal may be made by the school principal to the Commissioner.

Contest will be stopped by officials and coaches. Ejection from the contest for those athlete(s) designated by the officials. The team(s) that left the bench area must forfeit the contest, record a loss, and the team(s) and player(s) placed on probation for the remainder of the season. A written appeal may be made by the school(s) principal to the commissioner. A second infraction will result in cessation of the season for the team(s) and/or athlete(s). A written appeal may be made by the school(s) principal to the commissioner. Official to make report by the next school day to the commissioner.

If the act occurs in the CIF-San Diego Finals, and both teams are charged with a forfeit, there will be no champion. A written appeal may be made by school(s) principal to the commissioner. Official to make report by the next school day to commissioner.

Commissioner, as authorized by Green Book, to determine and implement penalties up to and including career suspension for individuals and following year penalties for teams.

If a team uses an ineligible player in a contest(s), the contest(s) shall be forfeited. The number of forfeited contest(s) exceeds the maximum permitted in accordance with the CIFSDS Forfeit Policy (see Green Book) the team shall be excluded from CIFSDS playoffs.

If an ineligible individual is permitted to participate in an individual sport, that individual is excluded from playoffs, and the school is subject to penalties for a willful violation of a rule.

*Commissioner, as authorized by Green Book, may determine and implement additional penalties up to and including career suspension for individuals and following year penalties for teams.



CIF-San Diego Section
2131 Pan American Plaza
San Diego, CA 92101
Phone 858-292-8165
Fax 858-292-1375
www.cifsd.org

State CIF Bylaws require that all information provided in regard to any aspect of student eligibility to participate in athletics must be true, correct, accurate, and complete.

Bylaw 510

State CIF Bylaws also require that parents, students, coaches and schools must disclose any pre-enrollment contact of any kind whatsoever with the parent or student during the 24 months prior to enrollment in the school. Please check the appropriate box or boxes below.

- [] I am a returning student to Fallbrook High School.
[] I have not attended an athletic camp, workshop, or workout put on by another High School other than Fallbrook High School within the last 24 months.
- OR -
[] I am an incoming 9th grader from a middle school within the Fallbrook High School District (feeder schools).
- OR -
[] I am a student new to the Fallbrook High School District. Please check the appropriate box or boxes below.
[] I have not attended an athletic camp, workshop, or workout at Fallbrook High School within the last 24 months or attended an athletic camp, workshop, or workout put on by Fallbrook High School staff within the last 24 months.
[] There has been no pre-enrollment contact of any kind whatsoever during the previous 24 months with anyone at or associated with the school or its athletic programs.
[] I have attended an athletic camp, workshop, or workout at Fallbrook High School within the last 24 months or attended an athletic camp, workshop, or workout put on by Fallbrook High School staff within the last 24 months. A true, correct, accurate, and complete disclosure of that contact is attached to this form.
[] There has been pre-enrollment contact during the previous 24 months with individuals at or associated with the school and its athletic programs. A true, correct, accurate, and complete disclosure of that contact is attached to this form.

ARTICLE 60 BYLAW 600

COMPETITION ON AN OUTSIDE TEAM – A student on a high school team becomes ineligible if the student competes in a contest on an “outside” team, in the same sport, during the student’s high school season of sport. Penalties for violation of bylaw 600 – the student becomes immediately ineligible for participation with his/her high school team. All games in which a student participated on his/her high school team after violation of Bylaw 600 shall be forfeited.

Parent/Guardian Signature Date

Student Signature Date

FALLBROOK HIGH SCHOOL

What is sudden cardiac arrest (SCA)?

Sudden cardiac arrest (SCA) is when the heart stops beating, suddenly and unexpectedly. When this happens blood stops flowing to the brain and other vital organs. SCA is NOT a heart attack. A heart attack is caused by a blockage that stops the flow of blood to the heart. SCA is a malfunction in the heart's electrical system, causing the victim to collapse. The malfunction is caused by a congenital or genetic defect in the heart's structure. SCA is more likely to occur during exercise or physical activity, so student-athletes are at greater risk. While a heart condition may have no warning signs, studies show that many young people do have symptoms but neglect to tell an adult. This may be because they are embarrassed, they do not want to jeopardize their playing time, they mistakenly think they're out of shape and need to train harder, or they simply ignore the symptoms, assuming they will "just go away."

We need to let student-athletes know that if they experience any SCA-related symptoms it is crucial to alert an adult and get follow-up care as soon as possible with a primary care physician. If the athlete has any of the SCA risk factors, these should also be discussed with a doctor to determine if further testing is needed. Wait for your doctor's feedback before returning to play, and alert your coach, athletic trainer and school nurse about any diagnosed conditions.

What are the warning signs and risk factors for SCA?

Potential indicators that SCA may occur	Factors that increase the risk of SCA
<ul style="list-style-type: none">• Fainting or seizure, especially during or right after exercise• Fainting repeatedly or with excitement or startle• Excessive shortness of breath during exercise• Racing or fluttering heart palpitations or irregular heartbeat• Repeated dizziness or lightheadedness• Chest pain or discomfort with exercise• Excessive, unexpected fatigue during or after exercise	<ul style="list-style-type: none">• Family history of known heart abnormalities or sudden death before age 50• Specific family history of Long QT syndrome, Brugada syndrome, Hypertrophic Cardiomyopathy, or Arrhythmogenic Right Ventricular Dysplasia• Family members with unexplained fainting, seizures, drowning or near drowning, or car accidents• Known structural heart abnormality, repaired or unrepaired• Use of drugs such as cocaine, inhalants, "recreational" drugs, excessive energy drinks or performance enhancing supplements

What is CIF doing to help protect student-athletes?

CIF amended its bylaws to include language that adds SCA training to coach certification and practice and game protocol that empowers coaches to remove from play a student-athlete who exhibits fainting—the number one warning sign of a potential heart condition. **A student-athlete who has been removed from play after displaying signs or symptoms associated with SCA may not return to play until he or she is evaluated and cleared by a licensed health care provider.** Parents, guardians and caregivers are urged to dialogue with student-athletes about their heart health and everyone associated with high school sports should be familiar with the cardiac chain of survival so they are prepared in the event of a cardiac emergency.

I have reviewed and understand the symptoms and warning signs of SCA and the new CIF protocol to incorporate SCA prevention strategies into my student's sports program.

Signature of the Athlete

Date

Signature of the Parent/Guardian

Date

FHS CONCUSSION INFORMATION & POLICY

A mild traumatic brain injury (MTBI) commonly referred to as a concussion, is defined as a complex patho-physiologic process affecting the brain, induced by traumatic biomechanical forces secondary to direct or indirect forces to the head. Concussions result in a constellation of physical, cognitive, emotional and/or sleep-related symptoms and may or may not involve a loss of consciousness (in fact most occur without a loss of consciousness). Duration of symptoms is highly variable and may last from several minutes to days, weeks, months, or even longer in some cases. One of the biggest concerns with concussions is what's known as second impact syndrome. It occurs when a patient suffering from a brain injury receives another blow to the head during this vulnerable recovery period. Often times this second incident can be much less severe but have far greater and longer lasting side effects. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Symptoms may include one or more of the following:

- | | |
|--|--|
| <ul style="list-style-type: none">• Headaches• "Pressure in head"• Nausea or vomiting• Neck pain• Balance problems or dizziness• Blurred, double, or fuzzy vision• Sensitivity to light or noise• Feeling sluggish or slowed down• Feeling foggy or groggy• Drowsiness• Change in sleep patterns | <ul style="list-style-type: none">• Amnesia• "Don't feel right"• Fatigue or low energy• Sadness• Nervousness or anxiety• Irritability• More emotional• Confusion• Concentration or memory problems (forgetting game plays)• Repeating the same question/comment |
|--|--|

Signs observed by teammates, parents and coaches include:

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays incoordination
- Answers questions slowly
- Slurred speech
- Shows behavior or personality changes
- Can't recall events prior to hit
- Can't recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness

FHS CONCUSSION INFORMATION & POLICY

Pursuant to California State Law, “an athlete who is suspected of sustaining a concussion or head injury in an athletic activity shall be immediately removed from the athletic activity for the remainder of the day, and shall not be permitted to return to the athletic activity until he or she is evaluated by a licensed health care provider (MD or DO). The athlete shall not be permitted to return to the athletic activity until he or she receives written clearance to return to the athletic activity from a licensed health care provider. If the licensed health care provider determines that the athlete sustained a concussion or a head injury, the athlete shall also complete a graduated return-to-play protocol of no less than seven days in duration under the supervision of a licensed health care provider” (CA ed code 49475). Below is the general FHS concussion policy in order to comply with state law and for the safety and protection of our student-athletes.

1. Student-athletes participating in at risk sports will be baseline tested using the Standardized Assessment of Concussion (SAC) test.
2. Any student-athlete suspected of suffering a concussion will be immediately removed from participation for further testing by FUHS medical staff
3. If it is assessed that a concussion was sustained the student-athlete will be withheld from participation, no matter how quickly symptoms resolve.
4. If a student-athlete has suffered a concussion they will be given written and oral instruction on how to follow up
5. A ride home must be arranged for the student-athlete
6. Any athlete suspected of suffering a concussion MUST be cleared by a physician (MD or DO) to begin the **return to play** protocol
 - a. (This doctor’s note **DOES NOT** clear the athlete for participation)
7. The athlete **MUST** pass the return to play protocol in order to return to full participation
8. Return to play protocol consists of the following
 - a. SAC test to compare to the student athlete’s baseline score
 - b. Graded symptoms checklist to monitor athlete’s symptoms day to day
 - c. Once the student-athlete is symptom free, they will be put through 7 days of recovery
 - i. Day 1 – Symptom free for 24 hours
 - ii. Day 2 – Light exercise (ex: exercise bike, elliptical)
 - iii. Day 3 – Moderate exercise (ex: running, jumping jacks, pushups)
 - iv. Day 4 – Anaerobic and agility exercise (ex: sprinting, changing directions)
 - v. Day 5 – Modified practice (ex: weight lifting, no contact practice, no “live drills”)
 - vi. Day 6 – Full practice
 - vii. Day 7 – Return to participation
 - d. *If at any time any of the student-athlete’s symptoms return, they will be immediately withheld from participation and must return to step A in the protocol
9. **NO ATHLETE CAN RETURN** to competition until he/she is **ASYMPTOMATIC** in limited, controlled, and full-contact activities and cleared by FUHS’ medical staff.

Signature of the Athlete

Date

Signature of the Parent/Guardian

Date

Athletic Training Room Hours of Operation and Rules

Monday-Friday

Lunch time – end of practice/games*

*Hours will vary based on season or events of the day

The location of the Athletic Trainer will be posted on the office door anytime I leave the office
During game coverage the Athletic Trainer will only be available **FOR EMERGENCIES ONLY**
Please note: The Athletic Training Room can be a busy place and you may have to wait to be helped, please plan accordingly

Athletic Training Room Rules

1. Leave all cleats, bags, and muddy/dirty shoes at the door
2. SIGN IN when you first enter the Athletic Training room. You will be helped in the order that you sign in. (Please note: preference will be given to in season and/or game day athletes. If you are out of season you may be waiting longer)
3. NO FOOD OR DRINKS (except water)
4. NO PROFANITY
5. NO HORSEPLAY
6. The Athletic Training Room is not a social club. If you are not here for treatment or if you are distracting from other athlete's treatments you will be asked to leave
7. Please respect the Athletic Trainer, Athletic Training students, fellow athletes, the Athletic Training Room, and equipment. Failure to do so will result in a referral or other consequences

If you have ANY injury/health related question or problem, do not hesitate to ask. We are here to help!

Signature of the Athlete

Date

Signature of the Parent/Guardian

Date

FALLBROOK UNION HIGH SCHOOL
Athletic Participation Health Form

Student Name: _____ Student #: _____ DOB: _____ Grade: _____ Sex: _____

Sports of Interest: 1. _____ 2. _____ 3. _____ 4. _____

This section to be filled out by parent guardian before seeing physician

I. EMERGENCY MEDICAL INFORMATION

____ Asthma ____ Diabetes ____ Fainting ____ Heart Condition
____ Epilepsy/Seizures ____ Bleeding Disorder ____ Other

Allergic to: ____ Foods ____ Insects ____ Medication ____ Animals
If yes to any above, please explain: _____

II. MEDICAL HISTORY

Are you:
Aware of any health problems/conditions? _____
Taking any medications? _____
Under medical care? _____

HAVE YOU EVER HAD OR CURRENTLY HAVE:

- YES/NO
____/____ Serious Injury
____/____ Serious Illness
____/____ Surgery
____/____ Hospitalization
____/____ Concussion
____/____ Heart Murmur
____/____ Enlarged Heart
____/____ Marfan syndrome
____/____ Relatives with heart problems
____/____ Relatives die from hearth problems before 50
____/____ Chest pain with exercise
____/____ Dizziness/Fainting with exercise
____/____ High blood pressure
____/____ Heat Illness
____/____ Neck/Spine Injury
____/____ Serious joint/bone injury
____/____ Pneumonia/Mononucleosis
____/____ Anemia/Sickle Cell
____/____ Hernia/Appendicitis
____/____ Birth defect
____/____ Eye/Ear problems
____/____ Nose/Throat problems
____/____ Respiratory/Lung problems
____/____ Kidney/Urinary problems
____/____ Stomach/Gastrointestinal problems
____/____ Dental problems

III. PARENTAL STATEMENT

Has it ever been necessary to restrict student's activities for medical reasons? ____YES ____NO
Is the student taking regular medication? ____YES ____NO
Does the student require special care/attention ____YES ____NO
EXPLAIN: _____

I understand that the short and basic sports physical examination has been given with the understanding that a complete and correct medical history has been provided. If the student is known to have any health or medical condition of any nature or type, I understand it is my responsibility to assure that the doctor will be advised of the condition during the examination. I also understand it is my responsibility to determine together with the student's family physician whether a comprehensive medical examination should be undertaken by the student's family physician to approve the student's participation in athletics.

To the best of my knowledge, the information given is accurate and complete. I provide my consent for my son/daughter to have an athletic physical examination and fully participate in interscholastic athletics subject to limitations noted. I understand I will be required to provide proof of medical insurance and pay (or petition waiver of) a transportation fee if my son/daughter is a member of an athletic team.

Parent/Guardian Signature _____

Date: _____

THIS SECTION TO BE COMPLETED BY HEALTHCARE PROFESSIONAL
IV. A. HEALTH EXAMINATION

HT: _____ WT: _____ BP: _____

Pulse: _____ PERL: _____ Glasses/Contacts: _____

B. To be completed by MD/DO/NP/PA

Please insist the applicant complete medical history. The student will be participating in strenuous activity that will include athletic competition. After completing this section please summarize any restrictions and/or necessary recommendations or follow-ups and sign.

Check if normal, circle if abnormal and explain:

- ____ Growth/Development ____ Oral/Pharynx ____ Lungs/Respiratory
____ Heart/Cardiovascular ____ Skin ____ Eyes/Ears/Nose
____ Head/Neck/Thyroid ____ Neurological ____ Abdomen/Hernia
____ Gastrointestinal ____ Musculoskeletal

Comments: _____

V. PHYSICIAN'S EVALUATION

Approved for participation in interscholastic athletics:
YES: _____ NO: _____ YES with CONDITIONS: _____
SPECIFIC EXEMPTIONS, RECOMMENDATIONS, RESTRICTIONS: _____

SIGNED: _____
(MD/DO/NP/PA)

DATE: _____

All students needing medication/s during school hours and/or after school hours including practices, games, and all school activities must have a written order form from their physician with the orders for the medication on file with the nurse in the Health office or the Athletic Trainer in the Athletic Training Room.. A new form must be completed upon entering FUHS and at the beginning of each school year. Forms are available in the Health Office.

