

POTTER VALLEY JUNIOR HIGH AND HIGH SCHOOL
CODE OF CONDUCT

The purpose of this code is to set a high standard of conduct, eligibility and behavior. Students who participate in athletics and/or extracurricular activities do so with the understanding that the established rules and consequences will be observed. Students will be expected to faithfully follow these regulations. For students, the season starts with the first allowable practice by C.I.F. and ends with the last contest, including playoffs. For other students participating in various school activities, the time period may vary depending on the activity.

1. Students will meet eligibility requirements: Pass all classes with an overall 2.0 GPA with no F's. Eligibility will be declared at the beginning of each year and following each trimester.
2. Students will refrain from behavior prohibited by law on or off campus in accordance with School Board Policy 5131.6 (a-d).
 - A. Students will refrain from using, possessing or furnishing tobacco or tobacco products, E-cigarettes, Vaping or other electronic nicotine delivery devices.
 - (1) The consequences of violating this policy is suspension from participation in interscholastic contests or extracurricular events for seven (7) consecutive days. In order to regain participation at the end of this period, the student must:
 - (a) Continue to attend practices, games, and meetings, and
 - (b) Complete 8 hours of community service approved by the principal or designee.
 - (2) In addition, the student shall be placed on probation for the trimester in which the offense occurred plus the following trimester. Violation while on probation will result in suspension from representing the Potter Valley Community Unified School District in interscholastic sports or extracurricular events for the remainder of the probationary period.
 - B. Students will refrain from using, possessing or furnishing alcohol, marijuana and all related products or illegal drugs. This includes, but is not limited to, the expectation that students not knowingly attend gatherings where drugs or alcohol are illegally being used or possessed.
 - (1) The consequences of violating this policy is suspension from participation in interscholastic contests or extracurricular events for fourteen (14) consecutive days. In order to regain participation at the end of this period, the student must:
 - (a) Continue to attend practices, games, and meetings, and
 - (b) Complete 24 hours of community service approved by the principal or designee.
 - (2) In addition, the student shall be placed on probation for the trimester in which the offense occurred plus the following trimester. An additional violation while on probation will result in suspension from representing the Potter Valley Community Unified School District in interscholastic contests or extracurricular programs for the remainder of the probationary period.
3. Students will not be allowed to practice or play in games or participate in activities unless they attend three (3) periods in their required classes during the school day of the event. When a student goes home sick, they are not allowed to practice or play in games or participate in activities that same school day. Excused or excused verified absences may be an exception.
4. Students who quit a team with approval of the new coach can participate in another sport. However, students who are dropped for disciplinary reasons cannot participate in another sport until that team has completed its season.
5. Students will establish regular and prompt attendance at all activities, events, practices and/or games, except in case of illness or when the advisor/coach excuses the student.
 - First offense – conference with the advisor/coach.
 - Second offense – suspended from the next activity/contest.
 - Third offense – suspended for the remainder of the activity/season.
6. Students must represent their school, family and the community through good citizenship and conduct at all times. This includes: Refraining from making derogatory remarks to opponents, especially comments of ethnic, racial, or sexual nature. Respecting the integrity and judgment of game officials. Congratulating opponents in a sincere manner following victory or defeat. Treating opponents with the respect that is accorded a guest or a friend. Showing concern for injured opponents. Ignoring taunting or unsportsmanlike conduct of opponents or their fans. Following the advisor/coach's directions and standards.
 - First offense – conference with the advisor/coach.
 - Second offense – suspended from the next activity/team contests for one week.
 - Third offense – suspended for the remainder of the activity/season.
7. Students must finish the season as a team member in good standing to be eligible for an award.

- 8. This agreement is to be implemented at the discretion of the site principal or designee.
- 9. This agreement must be signed and dated for students to be eligible.

I have read the Potter Valley Junior High and High School Code of Conduct and understand the responsibilities to myself, my advisor/coaches, the Potter Valley Junior High or High School and the community. I agree to abide by the provisions of the code.

Student Signature

Date

Sport (List all you plan to play this year)

School Year

I have read and discussed with _____ the Potter Valley Junior High School Code of Conduct and authorized him/her to participate in the extracurricular or athletic program under the provisions of this code.

Parent/Guardian

Date

Student Name: _____ Date: _____

Grade: _____ Birth Date: _____

Address: _____ Phone: _____

Family Physician: _____ Phone: _____

I hereby give my permission for the above named student to participate in athletics at Potter Valley Junior High or High School.

• **PARENT/GUARDIAN SIGNATURE** _____

INSURANCE: The school district does not provide medical insurance coverage for students. The parent must provide student health coverage through their own company or by purchasing insurance through the school district.

PLEASE CHECK ONE:

- Yes, we have health insurance that covers the above named student for all sports in which he/she will participate. We understand that it is our responsibility to notify the Athletic Director if insurance coverage lapses.

NAME OF INSURANCE CARRIER: _____

- No, we do not have health insurance, which covers the above named student.
School use only: _____

WARNING OF SERIOUS PHYSICAL INJURY POSSIBILITY

Participation in competitive athletics may result in severe injury, including paralysis or death. Changes in rules, improved conditioning programs, better medical coverage and improvements in equipment have reduced these risks. Still, it is impossible to totally eliminate such occurrences.

Players can reduce the chance of injury by obeying all safety rules in their sport, reporting all physical problems to their coaches, following a proper conditioning program and inspecting their own equipment daily. Damaged equipment must be replaced immediately. Even if all these requirements are met, and even if the athletes are using excellent protective equipment, a serious accident may still occur. As a condition of participation in athletics, we acknowledge that we have read and understand this warning statement.

• **PARENT/GUARDIAN SIGNATURE:** _____

ATHLETE
EJECTION POLICY NOTIFICATION FORM
(North Coast Section Ejection Policy)

Potter Valley High School

The following rules and minimum penalties are applicable to players as adopted by the NCS Board of Managers on April 21, 1995. This policy will be in effect beginning with the 2001-02 school year, (and will include non- league, league, invitational tournaments/events, post-season; league, section or state playoffs, etc.).

1. Ejection of a player from a contest for unsportsmanlike or dangerous conduct.
Penalty: The player shall be ineligible for the next contest (non-league, league, invitational tournament, post-season {league, section or state} playoff, etc.).
2. Illegal participation in the next contest by a player ejected in a previous contest.
Penalty: The contest shall be forfeited and the ineligible player shall be ineligible for the next contest.
3. Second ejection of a player for unsportsmanlike or dangerous conduct from a contest during one season. Penalty: The player shall be ineligible for the remainder of the season.
4. When one or more players leave the bench to begin or participate in an altercation. Penalty: The player(s) shall be ejected from the contest-in-question and become ineligible for the next contest (non-league, league, invitational tournament, post-season {league, section or state} playoff, etc.).

I have read and understand the rules and regulation of the Ejection Policy. Athletes may not Participate in any contest until this document is filed with the school.

Student's Signature

Date

SPORT _____

VAR JV FS Fr
(Circle one)

PARTICIPATION AGREEMENT FOR
CALIFORNIA INTERSCHOLASTIC FEDERATION (CIF)
VOLUNTARY ACTIVITIES

ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK

I authorize my son/daughter, _____, to participate in the
District-sponsored activities of _____.

I understand and acknowledge that these activities, by their very nature, pose the potential risk of serious injury/illness to individuals who participate in such activities.

I understand acknowledge that some of the injuries/illnesses which may result from participating in these activities include, but are not limited to the following:

- | | |
|------------------------------|--------------------------|
| 1. Sprains/strains | 5. Paralysis |
| 2. Fractured bones | 6. Loss of eyesight |
| 3. Unconsciousness | 7. Communicable diseases |
| 4. Head and/or back injuries | 8. Death |

I understand and acknowledge that participation in these activities is completely voluntary and as such is not required by the District for course credit or for completion of graduation requirements.

I understand and acknowledge that in order to participate in these activities, I and my son/daughter agree to assume liability and responsibility for any and all potential risks which may be associated with participation in these activities.

I understand, acknowledge and agree that the District, its employees, officers, agent, or volunteers, shall not be liable for any injury/illness suffered by my son/daughter which is incident to and/or associated with preparing for and/or participating in this activity.

I acknowledge that I have carefully read this PARTICIPATION AGREEMENT FOR CIF VOLUNTARY ACTIVITIES and that I understand and agree to its terms.

Parent/Guardian

Date

Student Signature

Date

A signed PARTICIPATION AGREEMENT FOR CIF VOLUNTARY ACTIVITIES must be on file with the District before a student will be allowed to participate in the above extra-curricular activities.

Potter Valley Junior High and High School

Print 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 under CIF Bylaw 200.D, there could be penalties for false or fraudulent information. We also understand that the Potter Valley Community Unified School District policy regarding the use of illegal drugs will be enforced for any violations of these rules.

Signature of Athlete

Date

Signature of Parent/Caregiver

Date

Potter Valley High School
Concussion Notification Sheet

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. 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:
<ul style="list-style-type: none"> ● 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

Adapted from the CDC and the 3rd International Conference on Concussion in Sport
Document created 5/20/2010

Potter Valley High School
Concussion Notification Sheet

What can happen if my child keeps on playing with a concussion or returns too soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete's safety.

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new CIF Bylaw 313 now requires implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

“A student-athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time and for the remainder of the day.”

And

“A student-athlete who has been removed may not return to play until the athlete is evaluated by a licensed healthcare provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider”.

You should also inform your child's coach if you think that your child may have a concussion. Remember it's better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:

<http://www.cdc.gov/ConcussionInYouthSports/>

Student-athlete Name Printed

Student-athlete Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date

Adapted from the CDC and the 3rd International Conference on Concussion in Sport
Document created 5/20/2010

Keep Their Heart in the Game

A Sudden Cardiac Arrest Information Sheet for Athletes and Parents/Guardians

What is sudden cardiac arrest?

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.

How common is sudden cardiac arrest in the United States?

As the leading cause of death in the U.S., there are more than 300,000 cardiac arrests outside hospitals each year, with nine out of 10 resulting in death. Thousands of sudden cardiac arrests occur among youth, as it is the #2 cause of death under 25 and the #1 killer of student athletes during exercise.

Who is at risk for sudden cardiac arrest?

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." Additionally, some health history factors increase the risk of SCA.

What should you do if your student-athlete is experiencing any of these symptoms?

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, trainer and school nurse about any diagnosed conditions.

What is an AED?

An automated external defibrillator (AED) is the only way to save a sudden cardiac arrest victim. An AED is a portable, user-friendly device that automatically diagnoses potentially life-threatening heart rhythms and delivers an electric shock to restore normal rhythm. Anyone can operate an AED, regardless of training. Simple audio direction instructs the rescuer when to press a button to deliver the shock, while other AEDs provide an automatic shock if a fatal heart rhythm is detected. A rescuer cannot accidentally hurt a victim with an AED—quick action can only help. AEDs are designed to only shock victims whose hearts need to be restored to a healthy rhythm. Check with your school for locations of on-campus AEDs.

The Cardiac Chain of Survival

On average it takes EMS teams up to 12 minutes to arrive to a cardiac emergency. Every minute delay in attending to a sudden cardiac arrest victim decreases the chance of survival by 10%. Everyone should be prepared to take action in the first minutes of collapse.

Early Recognition of Sudden Cardiac Arrest

Collapsed and unresponsive.
Gasping, gurgling, snorting, moaning or labored breathing noises.
Seizure-like activity.

Early Access to 9-1-1

Confirm unresponsiveness.
Call 9-1-1 and follow emergency dispatcher's instructions.
Call any on-site Emergency Responders.

Early CPR

Begin cardiopulmonary resuscitation (CPR) immediately. Hands-only CPR involves fast and continual two-inch chest compressions— about 100 per minute.

Early Defibrillation

Immediately retrieve and use an automated external defibrillator (AED) as soon as possible to restore the heart to its normal rhythm. Mobile AED units have step-by-step instructions for a bystander to use in an emergency situation.

Early Advanced Care

Emergency Medical Services (EMS) Responders begin advanced life support including additional resuscitative measures and transfer to a hospital.

Cardiac Chain of Survival Courtesy of Parent Heart Watch

Keep Their Heart in the Game

Recognize the Warning Signs & Risk Factors of Sudden Cardiac Arrest (SCA)

Tell Your Coach and Consult Your Doctor if These Conditions are Present in Your Student-Athlete

Potential Indicators That SCA May Occur

- 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

- 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 (ARVD)
- 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

Factors That Increase the Risk of SCA

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.

STUDENT-ATHLETE SIGNATURE

PRINT STUDENT-ATHLETE’S NAME

DATE

PARENT/GUARDIAN SIGNATURE

PRINT PARENT/GUARDIAN’S NAME

DATE

For more information about Sudden Cardiac Arrest visit
California Interscholastic Federation <http://www.cifstate.org>
Eric Paredes Save A Life Foundation <http://www.epsavealife.org>
CardiacWise (20-minute training video) <http://www.sportsafetyinternational.org>

POTTER VALLEY JUNIOR HIGH AND HIGH SCHOOL
SPORTS PHYSICAL FORM

Student's Name: _____

Health Insurance Carrier: _____

Group Number: _____ Policy Number: _____

I HEREBY GIVE MY CONSENT FOR THE ABOVE NAMED STUDENT TO COMPETE IN SPORTS AT POTTER VALLEY JUNIOR HIGH AND HIGH SCHOOL. I AUTHORIZE THE ABOVE STUDENT TO GO WITH AND BE SUPERVISED BY A REPRESENTATIVE OF THE SCHOOL ON ANY TRIPS. IN CASE THE ABOVE NAMED STUDENT BECOMES ILL OR INJURED, POTTER VALLEY JUNIOR HIGH OR HIGH SCHOOL IS AUTHORIZED TO HAVE THE STUDENT TREATED AND I AUTHORIZE THE MEDICAL AGENCY TO RENDER TREATMENT.

Parent's Signature Home Phone Date

Home Address: _____
Mailing City Zip

If we cannot reach you, please give the name and telephone number of a local friend or relative (not a parent) whom we can contact.

Name Phone Number

THIS PORTION TO BE FILLED IN BY A PHYSICIAN

Physician's Name State License Number

I HEREBY CERTIFY THAT THE ABOVE NAMED STUDENT IS PHYSICALLY FIT TO ENGAGE IN SPORTS.

Physician's Signature Date

Has the student had any injury or physical condition that should be watched? Yes__ No__
If yes, please explain: _____

THIS FORM MUST BE COMPLETELY FILLED IN BEFORE
PARTICIPATING IN SPORTS