2021-22 CUSD High School
ACTIVITIES ELIGIBILITY PACKET
EXTRA/CO-CURRICULAR CODE OF CONDUCT / ASSUMPTION OF RISK / DRUG, ALCOHOL, & STEROID BAN / INSURANCE / PHYSICAL

STUDENTS:
Your participation in high school activities is dependent on your eligibility. PROTECT that eligibility by reviewing with your parent(s)/guardian(s) this summary of the CUSD Extra/Co-Curricular Code of Conduct. Extra/Co-curricular programs contribute to the educational, emotional and social development of students. Since students are not required to participate in extra/co-curricular programs, the choice to participate in these programs is a privilege and students are required to follow the Code of Conduct to remain eligible to participate. Extra/Co-curricular activities include student body offices, athletics, cheerleading, Winter Guard, and any other activities that are outside the regular school day and not a requirement of a course of instruction. Students who choose to participate in extra/co-curricular activities are expected to conduct themselves in a manner that reflects the values of the school and community they represent. In addition to the behavioral standards and disciplinary consequences applicable to all students in the District, each student desiring to participate in an extra/co-curricular activity must comply with the District's extra/co-curricular Code of Conduct.

PURPOSE OF INTERSCHOLASTIC ATHLETICS and EXTRA/CO-CURRICULAR ACTIVITIES is to give students the opportunity to:
• develop organizational skills to balance athletics/extra/co-curricular activities and academics.
• learn new skills and improve existing ones.
• experience commitment and dedication to school, extra/co-curricular activities, sport, team & coach.
• develop physical vigor and desirable habits in health and safety.
• learn what it takes to be a good teammate.
• develop new friendships.
• observe and exemplify good sportsmanship.
• demonstrate truthfulness.
• be dependable in fulfilling obligations and commitments.
• accept responsibility for consequences of actions and not make excuses or blame others.
• strive to excel.
• persevere, give 100% effort and not give up in the face of setbacks.
• control anger and frustration and refrain from displays of temper and bad language.
• accept losing and winning graciously; to congratulate opponents, not sulk, or display other negative behaviors
• understand that athletic competition and extra/co-curricular participation carries with it certain responsibilities.
• learn that, like any other violations in life, a violation of this Code has a consequence.

I understand that once I sign the eligibility statement all eligibility rules will apply. These expectations will apply from the first day of the school year or the start of the extra/co-curricular activity (including pre-season meetings, practices, camps, and school-sponsored activities) whichever comes first. This includes the activities scheduled prior to the start of the school year, through the end of the sport season and/or the end of the school year, whichever is longer in duration. Consequences of any Code violations are cumulative. For example, if a student violates his or her in their 9th grade year and then again in his or her 12th grade year, it counts as a second offense.

Student initials

Student initials
PARENTS:
The purpose for developing the district's Code of Conduct is to set behavioral standards that assist youth in making good decisions. It also sets the clear and consistent boundaries for your son/daughter's participation in extra/co-curricular activities and athletics.

REVIEW the following rules with your son or daughter. Your emphasis on the value of following these rules cannot be overstated.

CHECKLIST FOR STUDENTS ELIGIBILITY:
- Every participant and his/her parent/guardian will be apprised of the extra/co-curricular Code of Conduct in the required Athlete Committed presentations conducted at the beginning of each sports season. Every athlete and participant of a co-curricular activity is required to attend the Athlete Committed presentation with at least one parent/guardian each year.
- Physical exam AND HEALTH INSURANCE on record prior to pre-season workout and/or official start of practice
- Making adequate academic progress toward graduation, including having earned a GPA of no less than 2.0 and a minimum of 25 credits the previous semester, unless granted an exception by school administration.
- A Principal may grant one probationary period during grades 9 –12 for the student athlete who has the required number of credits but who fails to maintain a 2.0 GPA. This probationary period will not be applicable for the student who has a GPA lower than 1.5.
- Any student quitting or dismissed from a sport may not begin participating in the next sport until the current season of sport is completed. Exceptions may be applied per admin. discretion.
- Will not have turned 19 years old prior to June 15 before the start of their senior year.
- Physical exam on record prior to the start of the season.
- Will attend a minimum of four periods of school to be eligible for practices and competitions
- CIF restrictions may apply for some sports
- Will not use, possess, sell or distribute tobacco products.
- Will not use, possess, sell or distribute any vape products, including but not limited to, liquids and paraphernalia
- Will not use, possess, sell, distribute or be under the influence of alcoholic beverages, illegal drugs or performance enhancing substances (e.g. steroids), whether legal or illegal, look-alike drugs, or drug paraphernalia on school grounds, off school grounds, whether during sport season or out of sport season.
- Will not host or remain present at events, activities or locations where illegal distribution of alcohol, drugs or other performance-enhancing substances are present or used.
- Will not use, possess, or distribute firearms, weapons or explosive devices on school grounds or at school events.
- Will not engage in threatening, haz ing activities, bullying, vandalism, harassment, or other personal misconduct, including, but not limited to, witnessing intimidation or harassment and conduct that involves police or court action.
- Students will not engage in cyberbullying, participate in sending or creating inappropriate cyber images or be seen in an inappropriate cyber image.
- Any student failing to return or pay for lost or damaged co-curricular equipment (uniforms, etc.) will be suspended from future participation until restitution is made.
- School principals will direct the development and implementation of any needed school regulations and/or forms to implement this procedure.
- I agree to fully cooperate in any investigation honestly and truthfully.

*For purposes of this section, “possess” shall be defined as having in one’s possession or control, e.g., on one’s person or in one’s physical control, or to have in one’s presence or close proximity to be used in an illegal activity.

Parent Responsibility
Parents and guardians are essential partners in maintaining a safe, educational and enjoyable experience for students. When present at the District’s events, including athletic games, practices, and extra/co-curricular activities, they are expected to model the kind of citizenship and sportsmanship that is expected and required of students. The following are among the District’s expectations for the parents of student athletes and extra/co-curricular participants:

Parents/guardians:
- have knowledge, understanding and agreement about the Rules and Conduct/Standards included in this document.
- know the consequences for violations of those Rules and Conduct/Standards, and will assist in their enforcement.
- are supportive and encourage their children to demonstrate appropriate behavior while representing the District as student athletes and extra/co-curricular participants.
- hold their children accountable for their actions and guide them in making proper decisions regarding drugs, alcohol and tobacco and/or nicotine products.
- hold their children accountable for their actions and behaviors towards others ensuring that their son/daughter does not bully or harass others and that their son/daughter is not a bystander to this behavior.
- understand individual team rules/expectations and address concerns regarding their children’s program to the coach.
- are knowledgeable spectators, knowing the rules of the game and serving as role models for sportsmanship. They cheer our successes, and show understanding in the wake of defeat. They encourage the efforts of their children’s teams, and they respect the efforts of the opposing teams.
- adhere to state laws that prohibit smoking/vaping on school grounds or in school buildings.
- bring their concerns to the attention of the appropriate coach(es), including concerns about the mental and physical treatment of their children, ways to help their children improve, and their children’s behavior. They schedule meetings with coaches in order that their concerns may be discussed at appropriate times and places.
- demonstrate a respect for the privacy of all student athletes, and an understanding of the coaches’ responsibilities to all student athletes, by refraining from speaking with coaches about such issues as playing time, athletic ability, and team strategy, insofar as those subjects relate to student athletes other than their own child.
- have viewed the free Cardiac Arrest video located at https://nfhslearn.com/courses/61032/sudden-cardiac-arrest
- are aware of, understand, and will follow the CUSD Board-adopted Code of Conduct (adopted 2/2018) which includes spectators, attached to packet (please keep), and provided on Code Night.
Code Violations and Consequences

CODE VIOLATIONS:
Students will comply with all state and local laws as well as all school district policies and regulations. Students are required to comply with all Education Codes 24 hours a day, seven days a week in order to remain eligible for participation. Any student who chooses to participate in extra/co-curricular activities and who violates the Code of Conduct in any way may experience disciplinary consequences. Disciplinary consequences will be assigned for violations of the Code of Conduct per the following Education Codes:

Education Code 48900 (a-t):

a. (1) Physical injury on another person
   (2) Willfully used force or violence upon another person
b. Possessed, sold, or otherwise furnished a firearm, knife, or otherwise dangerous object
c. Offered, arranged or negotiated the sale, or been under the influence, of a controlled substance (additional consequences may apply-see below)*
d. Dangerous object
e. Robbery or extortion
f. Damage to school property or private property
g. Theft of school property or private property
h. Tobacco and/or nicotine products
i. Profanity or vulgarity
(j) Drug paraphernalia
(k) Disrupted school activities or defiance of school authority
(l) Possession of stolen school property or private property
(m) Possessed an imitation firearm
(n) Sexual assault
(o) Witness intimidation or harassment
(p) Negotiated the sale of the drug Soma
(q) Hazing
(r) Engaged in an act of bullying (additional consequences may apply-see below)**
(s) Aiding and/or abets, the infliction of physical injury to another person
(t) As used in this section, “school property” includes, but is not limited to, electronic files and databases

More specific explanations of these codes can be found on the following website: http://www.leginfo.ca.gov

* AGREEMENT FOR COMPLETE DRUG AND ALCOHOL BAN:

- Student athletes and participants in extra/co-curricular activities are expected to never use, possess, sell or be in the presence of and location of illegal alcohol or drugs as defined in Education Code 48900 at any time. These expectations will apply from the first day of the school year or the start of the extra/co-curricular activity (including pre-season meetings, practices, camps, and school-sponsored activities) whichever comes first. This includes the activities scheduled prior to the start of the school year, through the end of the sport season and/or the end of the school year, whichever is longer in duration.
- Additionally, athletes and extra/co-curricular participants may not host or remain present at events, activities, or location where illegal distribution of alcohol, drugs, or other controlled substances are present and/or being used.
- If a student attends a party/gathering where alcohol or drugs are being consumed and/or illegally dispensed, the student must leave the party/gathering immediately – and take as many of your teammates with you as possible.
- The student must report their attendance to a coach or school administrator before the end of the next school day.
- Because possession and use of alcohol or drugs by youth is against the law, it is our intent to prevent any student from being in an environment which greatly increases the risk of danger and negative behaviors.

** BAN ON USE OF ANDROGENIC/ANABOLIC STEROIDS:

- Student athletes, participants in extra/co-curricular activities and their parents, legal guardians/caregivers 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. Student athletes and their parents, legal guardians/caregivers also recognize that under CIF bylaw 200.D, there could be penalties for false or fraudulent information. Student athletes and their parents, legal guardians/caregivers also understand that District policy regarding the use of illegal drugs will be enforced for any violations of these rules.

** BULLYING AND HARASSMENT POLICY:

Chico Unified School District believes that all students have a right to a safe and healthy school environment. The district, schools, and community have an obligation to promote mutual respect, tolerance, and acceptance.
Students will not engage in cyber-bullying, participate in sending or creating inappropriate cyber images or be seen in an inappropriate cyber image.

Chico Unified School District will not tolerate behavior that infringes on the safety of any student. A student shall not intimidate or harass another student through words or actions. Such behavior includes: direct physical contact, such as hitting or shoving; verbal assaults, such as teasing or name-calling; and social isolation or manipulation. This includes cyber-bullying, threatening or harassing another student through any social networking site or electronic media device (i.e., texting, sexting, cyber imaging).

Chico Unified School District expects students and/or staff to immediately report incidents of bullying to the principal or designee.

**CONSEQUENCES FOR CODE VIOLATIONS** – violations verified by the Principal or designee and/or a law enforcement officer will require the disciplinary consequences described below:

**First Step:** Automatic suspension from co-curricular participation for no less than 20% of the total scheduled contests or co-curricular performances/events. The suspension will start from the first date of disciplinary action. For example, if a team has 10 scheduled contests and a student on that team violates the Code of Conduct, he/she will be suspended for no less than the next two games. The student is required to attend all meetings, sessions and practices and must participate in every group/team activity, but may not compete or perform. Additionally, the student must complete CUSD/BCBH Brief intervention sessions per the following process:

**AC Violations for actions occurring during school hours as described in Education Code 48900:**

- Students suspended to AFC/Cal will complete the New Leaf Intervention Curriculum during their suspension in ISS.
- If time allows, students will complete one session of the CUSD/BCBH Brief Intervention (BI) program, facilitated by staff on the AFC/Cal Campus. Three more sessions of the CUSD/BCBH BI program will be facilitated by BCBH staff back on the students’ comprehensive site during the school day.
- If a student is on a home suspension, or if one session is not completed as part of a suspension at AFC, three or four BI sessions, as determined by site staff, will be facilitated by BCBH staff back on the students’ comprehensive site during the school day.

**AC Violations for actions occurring outside the parameters of the California Ed. Code, but within the parameters of the CUSD Code of Conduct:**

- Three or four BI sessions, as determined by site staff, will be facilitated by a BCBH staff member on the comprehensive site during the school day.
- At site-level discretion, completion of the New Leaf curriculum may be required of the returning student.

**Second Step:** Automatic suspension from extra/co-curricular participation for no less than 50% of the total scheduled contests or extra/co-curricular performances/events. The suspension will start from the first date of disciplinary action. For example, if a team has 10 scheduled contests and a student on that team violates the Code of Conduct, he/she will be suspended for no less than the next five games. The student is required to attend all meetings, sessions and practices and must participate in every group/team activity, but may not compete or perform.

**Third Step:** Automatic suspension from extra/co-curricular participation for the duration of the school year. The student will be placed on probation for the following year and a subsequent violation while on probation will result in the student being denied further co-curricular participation for the remainder of the school year.

- Students that provide a place or location for committing an illegal act will automatically move to the Second Step above.
- Students who self-report their own code infraction will have the opportunity to receive a lesser penalty and/or reduced suspension.

Parent initials:  
Student initials:
FELONY VIOLATIONS:
Conviction of any felony criminal offense or any juvenile offense that would be a felony if the student were an adult. This section is also applicable 24 hours per day, seven days a week. The student-athlete may still face team-level and/or site-level discipline.

First Step: Suspension from co-curricular participation for no less than 40 days of school from the first date of disciplinary action.

Second Step: Suspension from extra/co-curricular participation for the duration of the school year. The student will be placed on probation for the following year, and a subsequent violation while on probation will cause the student to be denied further co-curricular participation for the remainder of the school year.

DUE PROCESS REVIEW:
- Students suspended from extra/co-curricular activities will be notified by the principal/designee of the suspension and the basis thereof, as soon as practical after the school becomes aware of the basis for the suspension.
- Students shall be entitled to a conference with the principal/designee within two days of the notification. Unless otherwise directed by the principal/designee, the actual suspension shall not take place until said conference is held.
- If the student or his or her parent/guardian is not satisfied with the results of the conference, they may have the decision reviewed by the superintendent/designee by making a request within five (5) school days of receiving the notification of the decision. Only the following factors will be considered during the appeal conference:
  - Did the school present evidence that a Code violation took place?
  - Did the student-athlete and parent/guardian have an opportunity to present their version of events to school administration?
  - Did the investigating administer have the basis to reasonably determine that a Code violation took place?
- If the student or his or her parent/guardian is not satisfied with the decision of the superintendent/designee, they may appear before the school board at a regular meeting (closed or open as requested by the parent).
- During the appeal process as noted above, the suspension from extra/co-curricular activities remains in effect pending the outcome of the appeal.
- The process provided for herein is intended to be informal in nature and shall in no way be intended to confer a right to appeal or hearing, other than as specifically provided for herein.
INFORMED CONSENT:
By its nature, participation in interscholastic athletics includes risk of injury and the transmission of infectious diseases such as HIV, Hepatitis B, herpes and others. Although serious injuries are not common and the risk of HIV transmission is almost nonexistent in supervised school athletic programs, it is impossible to eliminate all risk. Participants have the responsibility to help reduce that risk. Participants must obey all safety rules, report all physical and hygiene problems to their coaches, follow proper conditioning programs, and inspect their own equipment daily.

ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK:
- I understand and acknowledge that the activities of athletic teams, by their very nature, pose the potential risk of serious injury/illness to individuals who participate in such activities.
- I understand and acknowledge that some of the injuries/illnesses which may result from participating in activities include, but are not limited to, the following: Sprains/strains; fractured bones; unconsciousness; head and/or neck injuries; paralysis; loss of eyesight; communicable diseases; 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, agents, 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.

MEDICAL INSURANCE COVERAGE (Required):
California law (Education Code Sections 32220-21) requires every member of any interscholastic athletic team, as well as those associated directly with any interscholastic athletic event, including cheerleaders, team mascots, band member, team managers, etc., to possess accidental bodily injury insurance providing at least $1500 of scheduled medical and hospital benefits. Students are not to engage in interscholastic athletic practice, games or associated activities until the pertinent parts of this certificate have been completed and filed with the assistant principal of their school. Please specify below the required insurance coverage that you have provided for your son/daughter/ward.

*******REQUIRED INFORMATION*******

Health Insurance Policy
Carrier:________________________________________________________________________
Policy Number:____________________________________________________________________

*Please check with your insurance agent to be sure your plan includes tackle football if your child intends to participate in that sport.

Does your child have an IEP:  ○ Yes   ○ No

Have you EVER attended another high school other than this one?  ○ Yes   ○ No

If yes, where:__________________________________________________________________
SUMMARY OF THE CHICO UNIFIED SCHOOL DISTRICT

STUDENT CODE OF CONDUCT

The Chico Unified School District Board of Education has adopted the code of conduct for all students, not just those who participate in extra/co-curricular activities. This all-student code of conduct models behavior that is safe, orderly, respectful, trustworthy and civil. Copies of the full text of these codes of conduct are given to all students in September and are available upon request to parents. Please review with your child or children.

These codes of conduct provide legal definitions as required by California. The student code of conduct explains in detail the behavioral expectations of the school community for its students. It provides a list of student rights and responsibilities and describes the procedures that are available to students who are accused of violating the code of conduct. The Code of Conduct also describes the range of permissible school responses to any student violation.

Student Rights

Students are entitled to: pursue their education in an atmosphere that is safe and conducive to learning - free from bullying, intimidation and any form of harassment or threats; a course of study that responds to their educational needs; respect from all members of the school community; procedural due process provided by law; freedom of speech and expression that does not disrupt the educational process or infringe upon the rights of others; freedom from discrimination; a clear description of the rules that apply to them in school; and freedom from unreasonable search and seizure. Students with special needs are entitled to have their educational needs and behavior evaluated on the basis of those needs.

Student Responsibilities

Student responsibilities include: demonstrating self-respect and respect for others; working to achieve their full potential; following school rules and the directions of school staff, faculty and administration; fulfilling all educational assignments and obligations; demonstrating respect for school property and for the property of others; modeling good conduct; presenting themselves in clothing that is safe and suitable for school activities and does not disrupt the education process; financial responsibility for books, tools, computers, locks and any other school property or equipment provided to them. In addition, all students are required to attend one of the annual Athlete Committed Meetings offered at the start of each athletic season (fall, winter and spring).

Prohibited Behavior

The behavior prohibited by the student code of conduct includes: disorderly and disruptive conduct; insubordination; truancy; violent or threatening behavior; possession or use of alcohol or illegal substances; in the presence of alcohol or illegal substances; possession of drug paraphernalia; possession or use of a weapon or dangerous object; destruction of property; theft of school or private property; harassment or bullying of other students; use of tobacco products.

Academic Eligibility

In order to remain eligible for co-curricular activities students must maintain a minimum 2.0 GPA. Additionally, they must have earned a minimum of 20 credits in the preceding semester. Students that earn additional credit during the semester through the Independent Study Program (credit recovery) will become immediately eligible once both the above conditions are met.

Reporting Violations

All members of the school community have a duty to report activity that threatens student safety. Anyone observing or hearing of a person possessing a weapon, alcohol, or illegal substance shall report this information to a teacher or administrator immediately, without exception. All other violations should be reported to a teacher or administrator as soon as possible.

School Response to Violations

There is a wide range of school responses that are permitted when students violate the code of conduct. These range from verbal warnings to detention, Saturday School and suspension. In all cases where a student is accused of a violation of the code of conduct, s/he is entitled to notice of the violation and an opportunity to explain. The code of conduct provides for teacher removal of students from classrooms under certain circumstances. School district policy includes provisions for consideration of special needs students.
Any student who is determined to be a threat to the health and safety of students or staff may be removed from school pending completion of the discipline process. Bringing a weapon to school, committing a violent act, making threats to another, or possession or use of drugs or illegal substances can lead to immediate suspension and removal for up to one year. Any compulsory age student is entitled to an alternate form of instruction if they are removed or suspended from their instructional program.

**Corporal Punishment**

Corporal punishment (use of physical force as discipline) is strictly prohibited. Reasonable physical force may be used by a staff member to restrain a student when that student presents a danger to self, others or property.

**Searches**

School property may be searched at any time and for any reason by school officials; school lockers belong to the school and may be entered and searched by school officials without the student's consent or presence. Students and their property may be searched upon reasonable suspicion that contraband or a weapon is present.

**Code of Conduct for All Individuals On School Property**

All of those who use or occupy school property or premises under the control of the school are expected to model safe, lawful, respectful and civil behavior. This includes parents, staff, members of the Board of Education and all visitors to school. Those in violation of the following code of conduct will be asked to leave school premises; or may be subject to action by law enforcement agencies. Employees of the school district may be subject to applicable employee disciplinary proceedings.

**Crimes on School Property**

If there is reason to believe that a crime has been committed on school property or at a school sponsored function, law enforcement officials will be notified immediately.

**Public Participation**

Members of the school community are invited to submit comments and questions about the code of conduct to the building principals and/or the Superintendent.

**CUSD Policy Regarding Spectator Behavior at Extra/Co-Curricular Activities**

Chico Unified School District (CUSD) students have the outstanding privilege of access to multiple co-curricular and extra-curricular activities, including educational-based competitions. These activities provide opportunities for students to learn life lessons through competition and community-centered action. Parents and community members have a critical role in that learning by providing positive encouragement towards common goals, non-judgmental support, constructive criticism and specific praise. Through these actions, individuals attending these events can be an influential force in the healthy development of our students’ mental, social and physical wellness.

CUSD has long enjoyed tremendous support from our community. We specifically thank our parents, community members and other spectators for their long-standing positive support of our schools, students and specialized programs.

To ensure a continued healthy, positive and productive environment for our students as well as our larger Chico community, CUSD will take all necessary steps to ensure that those in attendance at CUSD events serve as positive role models for our students. Inappropriate, non-supportive or otherwise unhealthy behavior will not be tolerated. Examples of this behavior include, but are not limited to, the following:

- Verbal abuse, including taunting, jeering, personally-attacking, vulgar, or obscene language
Name: ___________________________, ID# ___________________, Sport(s) __________________

- Disrespectful signage
- Threatening behavior, including hand signals, thrown objects or physical contact

Our students and our community deserve better. In support of this, CUSD has implemented the following policy as it pertains to behavior at CUSD events.

**Removal From Event:** In addition to possible California Penal Code enforcement, the removal of an individual from any co-curricular or extra-curricular activity will result in the minimum of, but not limited to, the following consequences:

**First Offense:**
- Suspension from subsequent activities/contests as determined by site administration
- For non-students, the completion of the Positive Parenting class. Link: [https://nfhslearn.com/courses/18000/positive-sport-parenting](https://nfhslearn.com/courses/18000/positive-sport-parenting). Upon completion of the course, a completion certificate must be submitted to site administration prior to return to activities or contests.
- A Civility Letter, describing consequences for subsequent offenses, will be sent to the individual by CUSD staff (see attached example).

**Second Offense:**
- Suspension from any activities/contests for one calendar year from the date of occurrence
- Completion of the Positive Parenting class. Link: [https://nfhslearn.com/courses/18000/positive-sport-parenting](https://nfhslearn.com/courses/18000/positive-sport-parenting). Upon completion of the course, a completion certificate must be submitted to site administration. For maximum effect, this second course certificate must reflect the course completion date within the **LAST 14 DAYS of the suspension.** For example, if the suspension ends on Nov. 1st, the course must be taken between Oct. 17th and Oct. 31st.
- A Corrective Action Letter, written to all stakeholders affected by the behavior describing how the individual will take action to change his/her behavior, will be submitted to site administration. Parameters for this letter will be provided by site administration.
- A Civility Letter, describing consequences for subsequent offenses, will be sent to the individual by CUSD staff (see attached example).

**Third Offense:**
- Permanent ban from any school-sponsored co- or extra-curricular events.
- A Civility Letter, describing the permanent ban, will be sent to the individual by CUSD staff (see attached example).
I have read and understand the CUSD Student Code of Conduct and Spectator Code of Conduct for extra/co-curricular activities and recognize that a violation will result in the consequences as stated.

By signing this document I ______________________________ (parent/guardian), indicate that I have knowledge, understanding and agreement to these standards set forth, in order for ______________________________ (my son/daughter) to be afforded the privilege of representing ______________________________ High School as a student. I am also aware that any violation on the part of my child, to any of these standards, shall result in consequences contained within this policy. Additionally, by signing this document I authorize BCDBH to share the name of my son/daughter with the CUSD Wellness Counselor or designated point of contact.

Signature of Parent or Guardian ____________________________ Date __________

Signature of Student ____________________________ Date __________

1. PARENT AND STUDENT MUST SIGN AND RETURN TO SCHOOL prior to extra/ co-curricular participation. Students are not to engage in interscholastic athletic practice, games or associated activities until the pertinent parts of this certificate have been completed and filed with the assistant principal of their school.
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

Factors That Increase the Risk of SCA

- 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 un repaired
- 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.

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

National Federation of High Schools
(20-minute training video)
https://nfhslearn.com/courses/61032
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.

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
**Concussion Information 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:

- 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
- Blurred, double, or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish or slowed down
- Feeling foggy or groggy
- Drowsiness
- Change in sleep patterns

<table>
<thead>
<tr>
<th>Symptom</th>
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<tbody>
<tr>
<td>Amnesia</td>
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<tr>
<td>“Don’t feel right”</td>
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<tr>
<td>Fatigue or low energy</td>
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<tr>
<td>Sadness</td>
</tr>
<tr>
<td>Nervousness or anxiety</td>
</tr>
<tr>
<td>Irritability</td>
</tr>
<tr>
<td>More emotional</td>
</tr>
<tr>
<td>Confusion</td>
</tr>
<tr>
<td>Concentration or memory problems (forgetting game plays)</td>
</tr>
<tr>
<td>Repeating the same question/comment</td>
</tr>
</tbody>
</table>

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

**What can happen if my child keeps on playing with a concussion or returns to 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 athlete 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 health care 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 its 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/](http://www.cdc.gov/ConcussionInYouthSports/)

---

X ______________________ Parent/Guardian Signature Date:____________________

X ______________________ Student Signature Date:____________________
IN CONSIDERATION FOR BEING PERMITTED BY THE CHICO UNIFIED SCHOOL DISTRICT TO PARTICIPATE IN THE ABOVE ACTIVITY, I HEREBY WAIVE, RELEASE, AND DISCHARGE ANY AND ALL CLAIMS FOR DAMAGES FOR PERSONAL INJURY, ILLNESS (INCLUDING, BUT NOT LIMITED TO, COVID-19) DEATH, OR PROPERTY DAMAGE WHICH I MAY HAVE OR WHICH MAY HEREAFTER ACCRUE AS A RESULT OF MY PARTICIPATION IN SAID ACTIVITY, INCLUDING TRANSPORTATION TO AND FROM CUSD EVENTS. THIS RELEASE IS INTENDED TO DISCHARGE IN ADVANCE THE ABOVE DISTRICTS (ITS OFFICERS, EMPLOYEES, AND AGENTS) FROM AND AGAINST ANY AND ALL LIABILITY ARISING OUT OF OR CONNECTED IN ANY WAY WITH MY PARTICIPATION IN SAID ACTIVITY. I UNDERSTAND I MAY UNDERGO A WELLNESS CHECK EACH DAY OF THE ACTIVITY. I UNDERSTAND THAT THE ABOVE ACTIVITY MAY BE OF A HAZARDOUS NATURE AND/OR INCLUDE PHYSICAL AND/OR STRENUOUS EXERCISE OR ACTIVITY; AND THAT PARTICIPANTS IN THE ABOVE SPORT OR ACTIVITY OCCASIONALLY SUSTAIN MORTAL OR PERSONAL INJURIES AND/OR PROPERTY DAMAGES AS A CONSEQUENCE THEREOF. KNOWING THE RISKS INVOLVED, NEVERTHELESS, I HAVE VOLUNTARILY APPLIED TO PARTICIPATE IN SAID ACTIVITY, INCLUDING TRANSPORTATION TO AND FROM CUSD EVENTS, AND I HEREBY AGREE TO ASSUME ANY AND ALL RISKS OF INJURY OR DEATH AND TO RELEASE AND HOLD HARMLESS THE ABOVE DISTRICTS, ITS OFFICERS, EMPLOYEES, AND AGENTS. IT IS FURTHER UNDERSTOOD AND AGREED THAT THIS WAIVER, RELEASE, AND ASSUMPTION OF RISKS IS TO BE BINDING ON MY HEIRS AND Assigns. I FURTHER AGREE TO INDEMNIFY AND TO HOLD THE ABOVE DISTRICTS (ITS OFFICERS, EMPLOYEES, AND AGENTS) FREE AND HARMLESS FROM ANY LOSS, LIABILITY, DAMAGE, COST OR EXPENSE WHICH THEY MAY INCUR AS A RESULT OF ANY INJURY AND/OR PROPERTY DAMAGE THAT I MAY SUSTAIN WHILE PARTICIPATING IN SAID ACTIVITY. BY SIGNING THIS DOCUMENT I ATTEST MY WILLINGNESS TO CONDUCT A SELF-WELLNESS CHECK, INCLUDING A BODY TEMPERATURE CHECK EACH DAY I PARTICIPATE IN THIS ACTIVITY.

I HAVE CAREFULLY READ THE ABOVE AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE DISTRICTS AND SIGN IT OF MY OWN FREE WILL.
Preparticipation Physical Evaluation

<table>
<thead>
<tr>
<th>Name: ___________________________, ID# _________________, Sport(s) __________</th>
<th>HISTORY FORM</th>
</tr>
</thead>
</table>

**Insurance Company:** ___________________________  **Policy Number:** ___________________________

*Please check with your insurance agent to be sure your plan includes tackle football if your child intends to participate in that sport.*

**In case of emergency, contact:** Name________________________ Relationship________________ Phone:_____________________

Explain “Yes” answers below. Circle questions you do not know the answers to.

1. Has a doctor ever denied or restricted your participation in sports for any reason? [ ] Yes [ ] No
2. Do you have an ongoing medical condition (like diabetes or asthma)? [ ] Yes [ ] No
3. Are you currently taking any prescription or non-prescription (over-the-counter) medicines or pills? [ ] Yes [ ] No
4. Do you have allergies to medicines, pollens, foods, or stinging insects? [ ] Yes [ ] No
5. Have you ever passed out or nearly passed out during exercise? [ ] Yes [ ] No
6. Have you ever passed out or nearly passed out after exercise? [ ] Yes [ ] No
7. Have you ever had discomfort, pain, or pressure in your chest during exercise? [ ] Yes [ ] No
8. Does your heart race or skip beats during exercise? [ ] Yes [ ] No
9. Has a doctor ever told you that you have:
   - High blood pressure [ ] Yes
   - A heart murmur [ ] Yes
   - High cholesterol [ ] Yes
   - A heart infection [ ] Yes
10. Has a doctor ever ordered a test for your heart? (for example: ECG, echocardiogram) [ ] Yes [ ] No
11. Has anyone in your family died for no apparent reason? [ ] Yes [ ] No
12. Does anyone in your family have a heart problem? [ ] Yes [ ] No
13. Has any family member or relative died of heart problems or of sudden death before age 50? [ ] Yes [ ] No
14. Does anyone in your family have Marfan syndrome? [ ] Yes [ ] No
15. Have you ever spent the night in a hospital? [ ] Yes [ ] No
16. Have you ever had surgery? [ ] Yes [ ] No
17. Have you ever had an injury, like a sprain, muscle or ligament tear, or tendonitis, that caused you to miss a practice or game? If yes, circle affected area below: [ ] Yes [ ] No
18. Have you had any broken or fractured bones or dislocated joints? If yes, circle below: [ ] Yes [ ] No
19. Have you had a bone or joint injury that required x-rays, MRI, CT, surgery, injections, rehabilitation, physical therapy, a brace, a cast, or crutches? If yes, circle below: [ ] Yes [ ] No

<table>
<thead>
<tr>
<th>Head</th>
<th>Neck</th>
<th>Shoulder</th>
<th>Upper Arm</th>
<th>Elbow</th>
<th>Forearm</th>
<th>Hand/Fingers</th>
<th>Chest</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Upper Back</th>
<th>Lower Back</th>
<th>Hip</th>
<th>Thigh</th>
<th>Knee</th>
<th>Calf/Shin</th>
<th>Ankle</th>
<th>Foot/Toe</th>
</tr>
</thead>
</table>

20. Have you ever had a stress fracture? [ ] Yes [ ] No
21. Have you been told that you have or have you had an x-ray for atlantoaxial (neck) instability? [ ] Yes [ ] No
22. Do you regularly use a brace or assistive device? [ ] Yes [ ] No
23. Has a doctor ever told you that you have asthma or allergies? [ ] Yes [ ] No

24. Do you cough, wheeze, or have difficulty breathing during or after exercise? [ ] Yes [ ] No
25. Is there anyone in your family who has asthma? [ ] Yes [ ] No
26. Have you ever used an inhaler or taken asthma medicine? [ ] Yes [ ] No
27. Were you born without or are you missing a kidney, an eye, a testicle, or any other organ? [ ] Yes [ ] No
28. Have you had infectious mononucleosis (mono) within the last month? [ ] Yes [ ] No
29. Do you have any rashes, pressure sores, or other skin problems? [ ] Yes [ ] No
30. Have you had a herpes skin infection? [ ] Yes [ ] No
31. Have you ever had a head injury or concussion? [ ] Yes [ ] No
32. Have you been hit in the head and been confused or lost your memory? [ ] Yes [ ] No
33. Have you ever had a seizure? [ ] Yes [ ] No
34. Do you have headaches with exercise? [ ] Yes [ ] No
35. Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling? [ ] Yes [ ] No
36. Have you ever been unable to move your arms or legs after being hit or falling? [ ] Yes [ ] No
37. When exercising in the heat, do you have severe muscle cramps or become ill? [ ] Yes [ ] No
38. Has a doctor told you that you or someone in your family has sickle cell trait or sickle cell disease? [ ] Yes [ ] No
39. Have you had any problems with your eyes or vision? [ ] Yes [ ] No
40. Do you wear glasses or contact lenses? [ ] Yes [ ] No
41. Do you wear protective eyewear, such as goggles or a face shield? [ ] Yes [ ] No
42. Are you happy with your weight? [ ] Yes [ ] No
43. Are you trying to gain or lose weight? [ ] Yes [ ] No
44. Has anyone recommended you change your weight or eating habits? [ ] Yes [ ] No
45. Do you limit or carefully control what you eat? [ ] Yes [ ] No
46. Do you have any concerns that you would like to discuss with a doctor? [ ] Yes [ ] No

**FEMALES ONLY**

47. Have you ever had a menstrual period? [ ] Yes [ ] No
48. How old were you when you had your first menstrual period? [ ] Yes [ ] No
49. How many periods have you had in the last 12 months? [ ] Yes [ ] No

**Explain “Yes” answers here:**

________________________________________

Signature of Athlete__________________________  
Signature of PARENT: ___________________________  Date: ___________________________
Pre-participation Physical Evaluation

Name __________________________________________________________ Date of Birth ____________________________

Height________ Weight________ %Body Fat (optional)________ Pulse________ BP / (/ / / /)

Vision R 20/______  L20/______  Corrected: Y N  Pupils: Equal______ Unequal______

<table>
<thead>
<tr>
<th>MEDICAL</th>
<th>NORMAL</th>
<th>ABNORMAL FINDINGS</th>
<th>INITIALS*</th>
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<tbody>
<tr>
<td>Appearance (Phys)</td>
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</tr>
<tr>
<td>Eyes/ears/nose/throat</td>
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<td>Hearing</td>
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<td>Lymph nodes</td>
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<td>Heart</td>
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<td>Murmurs</td>
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<td>Pulses</td>
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<td>Lungs</td>
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<td>Abdomen</td>
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<td>Skin</td>
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<tr>
<td>Other</td>
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</tbody>
</table>

| MUSCULOSKELETAL    |        |                   |           |
| Neck               |        |                   |           |
| Back               |        |                   |           |
| Shoulder/arm       |        |                   |           |
| Elbow/forearm      |        |                   |           |
| Wrist/hand/fingers |        |                   |           |
| Hip/thigh          |        |                   |           |
| Knee               |        |                   |           |
| Leg/ankle          |        |                   |           |
| Foot/toes          |        |                   |           |

*Multiple-examiner set-up only.
+Having a third party present is recommended for the genitourinary examination.

Notes: __________________________________________________________________________________________
___________________________________________________________________________________________
___________________________________________________________________________________________

Name of physician (print/type)________________________________________________________Date________________

Address____________________________________________________________________________________Phone___________________

Signature of physician______________________________________________________, MD or DO