



THORP SCHOOL DISTRICT NO. 400

Post Office Box 150 · 10831 N. Thorp Hwy · Thorp, Washington 98946
Phone 509-964-2107 Fax 509-964-2313
www.thorpschools.org

Athletic/Activity Code and Handbook

To Parents and Students:

The opportunity to participate in any athletic or activities program offered by Thorp School District is a privilege granted to all Thorp registered students (see WIAA Handbook Section 18.5.0). Participants in these voluntary programs will conform to specific conduct and academic standards established by the Thorp Student Activity Code. Those who participate in Thorp activities are not only members of a team, club or class, but also are representatives of their student body, family, and community. Therefore, it is necessary and desirable that high standards be maintained in academics, citizenship, sportsmanship, loyalty, and student conduct, both in and outside of the school's activities.

This activity code will be signed yearly and is in effect from the first day of practice/ class/ club meeting and ends on the last day of school. Once the following paperwork is received by the office, you will receive a green slip to clear you to play (a green slip is required for every sport you wish to play).

The following must be completed in order to participate in sports or activities (at Thorp and/or Kittitas):

1. Completed Medical Emergency Authorization and Signed Request for Waiver of School Accident Plan Coverage ***Please complete *all* parts of form*** (**Page 2**).
2. Signed Acknowledgement of Receipt of Concussion Recognition and Management and Sudden Cardiac Arrest Information (**Pages 3-5**).
3. Signed Acknowledgement of the Athletic/Activity Handbook (**Pages 6-14**).
4. Current Physical (completed within the last two years, not to expire during sports season), signed by a licensed medical examiner. A physical form is attached (**see pages 15-18**), or the examiner's office can fax a completed physical form to the School Office at (509) 964-2313.
5. Paid ASB Card (\$20) Kittitas-Thorp Athletes must also pay Kittitas's ASB Fee (\$20)
This can be waived if the student qualifies for Free and Reduced Lunch. Kittitas-Thorp Athletes that qualify for Free and Reduced Lunch must have a parent-signed waiver to release that information to Kittitas Secondary School in order to waive the Kittitas ASB fee. See the office for the necessary forms.
6. **Kittitas Athletes Only:** See attached instructions (**Pages 19-20**) for Registering with Kittitas Secondary School's *Final Forms* online registration.
- 7.



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ATHLETICS ONLY **MEDICAL EMERGENCY AUTHORIZATION (required)**

Print name of student athlete: _____ Date: _____

As parent or legal guardian, I authorize the team physician, or in his/her absence a qualified physician, to examine the above-named student. In the event of injury, I authorize emergency care and to arrange for any consultation by a specialist, including a surgeon, he/she deems necessary to ensure proper care of the injury.

(Every effort will be made to contact the parent/guardian to explain the nature of the problem prior to any involved treatment.)

Signature of parent/guardian: _____

Print Name of parent/guardian: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Emergency contact person: _____

Relationship to student: _____ Phone: _____

Family physician's name: _____ Phone: _____

Name of family/student's insurance company _____

Subscriber's name under which dependent is covered: _____

Policy No. _____ Group No. _____ Phone: _____

REQUEST FOR WAIVER OF SCHOOL ACCIDENT PLAN COVERAGE (required)

I understand my son/daughter cannot participate in after-school athletics unless he/she is covered by a personal insurance plan or the School Accident Coverage Plan.

_____ My son/daughter is covered by the School Accident Coverage Plan.

_____ My son/daughter is covered by the insurance as listed in the Medical Emergency Authorization section above, and I will continue to keep the policy in force throughout the sports season. Therefore, I do not wish to enroll _____ in the School Accident Coverage Plan.

I accept full responsibility for the cost of any injury which my son/daughter may suffer while participating in the Thorp School District's Athletic Program, and give permission for my child to participate.

Parent/Guardian Signature: _____ Date: _____



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Sudden Cardiac Arrest Information Sheet for Student-Athletes, Coaches and Parents/Guardians SSB 5083 ~ SCA Awareness Act



What is sudden cardiac arrest? Sudden Cardiac Arrest (SCA) is the sudden onset of an abnormal and lethal heart rhythm, causing the heart to stop beating and the individual to collapse. SCA is the leading cause of death in the U.S. afflicting over 300,000 individuals per year.

SCA is also the leading cause of sudden death in young athletes during sports

What causes sudden cardiac arrest? SCA in young athletes is usually caused by a structural or electrical disorder of the heart. Many of these conditions are inherited (genetic) and can develop as an adolescent or young adult. SCA is more likely during exercise or physical activity, placing student-athletes with undiagnosed heart conditions at greater risk. SCA also can occur from a direct blow to the chest by a firm projectile (baseball, softball, lacrosse ball, or hockey puck) or by chest contact from another player (called "commotio cordis").

While a heart condition may have no warning signs, some young athletes may have symptoms but neglect to tell an adult. If any of the following symptoms are present, a cardiac evaluation by a physician is recommended:

- Passing out during exercise
- Chest pain with exercise
- Excessive shortness of breath with exercise
- Palpitations (heart racing for no reason)
- Unexplained seizures
- A family member with early onset heart disease or sudden death from a heart condition before the age of 40

How to prevent and treat sudden cardiac arrest? Some heart conditions at risk for SCA can be detected by a thorough heart screening evaluation. However, all schools and teams should be prepared to respond to a cardiac emergency. Young athletes who suffer SCA are collapsed and unresponsive and may appear to have brief seizure-like activity or abnormal breathing (gaspings). SCA can be effectively treated by immediate recognition, prompt CPR, and quick access to a defibrillator (AED). AEDs are safe, portable devices that read and analyze the heart rhythm and provide an electric shock (if necessary) to restore a normal heart rhythm.

Remember, to save a life: recognize SCA, call 9-1-1, begin CPR, and use an AED as soon as possible!



Cardiac 3-Minute Drill

1. RECOGNIZE Sudden Cardiac Arrest

- Collapsed and unresponsive
- Abnormal breathing
- Seizure-like activity

2. CALL 9-1-1

- Call for help and for an AED

3. CPR

- Begin chest compressions
- Push hard/ push fast (100 per minute)

4. AED

- Use AED as soon as possible

5. CONTINUE CARE

- Continue CPR and AED until EMS arrives



**Be Prepared!
Every Second Counts!**

UW Medicine
Center For Sports Cardiology
www.uwsportscardiology.org



WASHINGTON INTERSCHOLASTIC
ACTIVITIES ASSOCIATION



SCA Awareness
Youth Heart Screening
CPR/AED In Schools

www.nickoftimefoundation.org



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Concussion and Head Injury Information Sheet (**required**)

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 	<ul style="list-style-type: none"> · Amnesia · “Don’t feel right” · Fatigue or low energy · Sadness · Nervousness or anxiety · Irritability · More emotional · Repeating the same question/comment 	<ul style="list-style-type: none"> · Feeling sluggish or slowed down · Feeling foggy or groggy · Drowsiness · Change in sleep pattern · Confusion · Concentration or memory problems (forgetting game plays)
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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 	<ul style="list-style-type: none"> · 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
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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 fail to report symptoms of injuries. Concussions are no different. As a result, education of administrators, coaches, parents and students is the key to 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 "Zackery Lystedt Law" in Washington now requires the consistent and uniform implementation of long and well-established return-to-play concussion guidelines that have been recommended for several years:

"a youth 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

"...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/>

I HAVE RECEIVED, READ AND UNDERSTAND THE INFORMATION PRESENTED IN THE CONCUSSION RECOGNITION AND SUDDEN CARDIAC ARREST AWARENESS PAMPHLETS.

_____	_____	_____
Student-athlete Name (Printed)	Student-athlete Signature	Date
_____	_____ P	_____
Parent or Legal Guardian Printed	Parent or Legal Guardian Signature	Date



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ACTIVITY/ATHLETIC CODE AGREEMENT (required)

I have read the following attached Thorp School District Activity/Athletic Code and eligibility requirements. I agree to follow the guidelines to remain eligible to participate in Thorp athletics and/or activities.

_____	_____	_____
Student Name (printed)	Student Name (signed)	Date
_____	_____	_____
Parent Name (printed)	Parent Name (signed)	Date

Parents: Please indicate the sports in which you consent to your student participating in.

_____ My student may participate in *all* offered sports for which they are eligible

My student may *only* participate in:

- | | | |
|--------------------------|--------------------------------|-------------------------|
| _____ (MS/HS) Football | _____ (MS/HS) Girls Basketball | _____ (MS/HS) Track |
| _____ (MS/HS) Volleyball | _____ (MS/HS) Boys Basketball | _____ (MS/HS) Baseball |
| _____ (HS) Cheer | _____ (MS/HS) Wrestling | _____ (MS/HS) Fastpitch |
| | | _____ (HS) Golf |

For notification purposes (such as schedule changes), please list *at least one* parent email address:

Parent Email #1

Parent Email #2 (optional)



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Athletic/Activity Code

Students involved in activities shall abide by all rules and regulations established by the coaches/advisors, school administration, Thorp Activity Code, and the WIAA (Washington Interscholastic Activities Association). Provision is made for any Thorp student who has allegedly violated one or more of the Thorp Athletic Code standards to appeal the disciplinary action against them.

This activity code will be signed yearly and is in effect from the first day of practice or class or club meeting and ends on the last day of school.

Section 1: General Rules:

18.1.0 STUDENT ELIGIBILITY CRITERIA - All participants must be eligible under the rules of the Washington Interscholastic Activities Association to participate in an interscholastic contest. 18.1.1 If a school district has more restrictive eligibility standards, the student will be held to the more restrictive standard. 18.1.2 This regulation does not restrict participation in practices. 18.3.0 Only students who are currently eligible to participate in an activity may appear in the team uniform on the team bench, sideline, court, field or deck during the contest. (WIAA HANDBOOK/ wiaa.com)

WIAA Eligibility

A WIAA ruling states students can be failing only one (1) class in a six (6) period class schedule to participate in athletics, and Fall sports eligibility will be determined by the previous Spring's grades. Please refer to the WIAA website for more information about WIAA eligibility rules (*WIAA Handbook 18.7.0*)

Please Note: Grade checks for eligibility will be completed prior to the beginning of each season to participate in activities. Eligibility for Fall sports will be determined by the previous Spring's grades. Thorp School District will perform weekly eligibility grade checks. (*See Page 11 for Eligibility Ladder*)

1. I will remain academically eligible in accordance with the WIAA Grade requirements.
Running Start Students: I will maintain a coursework/credit load in accordance with WIAA requirements AND have on file with the School District, a Running Start Academic Plan .
2. I will conduct myself in an appropriate, orderly manner, both on and off the school grounds, so as to bring credit to my team, school, community and family. This includes, but is not limited to, use of appropriate, acceptable speech (no profanity), modeling only the kind of behavior that is consistent with unquestionable good sportsmanship.
3. I recognize and am willing to accept it as my responsibility to actively cooperate with teachers whose classes I miss because of athletic or club activities, so as to prepare and complete my assignments in advance or as required by the teachers.



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4. I agree to ride to and from all away activities in school-provided transportation unless my parent or legal guardian signs me off the bus or other school vehicle. If I am going to ride home with another adult (who is 21 years of age), I must have approval granted in writing by my parent/guardian and the note signed by the Principal or Athletic Director prior to departure time. A copy will be given to the coach/advisor.
5. I accept personal responsibility for all school equipment checked out to me and agree to return it promptly as requested in good condition. If lost or not returned in good condition, I will pay the school the cost of its original value.
6. I will follow the specific activity rules established by the coach or advisor.
7. I agree to report all injuries promptly to the coach or advisor.
8. I agree to be in school for a full day or have an excused absence if I am to participate in either practice or contests. If an unforeseen medical or family emergency occurs, approval may be granted by the Principal to participate in the daily activity/practice.
Please Note: Schools may not give students special treatment or privileges on a regular basis to enable them to participate in non-school athletic activities. Some examples of special treatment or privileges include reduced practice times, special workouts, late arrivals, early dismissals or missing a practice or contest. Regular is defined as being no more than once per week. (*WIAA Handbook 18.23.1*)
9. I agree to comply with all school rules and regulations.
10. I understand that this code of conduct applies to any school-sponsored event or activity.
11. I understand and agree that any violation of the criminal laws of the State of Washington, other than traffic infractions, shall constitute a violation of this activity code.
12. I agree not to use, consume, possess, transmit, or sell alcohol, tobacco (including smokeless tobacco), controlled substances or illicit drugs (not prescribed by a licensed physician).
13. I agree to abide by any and all rules applicable to me as stated in the current WIAA Handbook.



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SECTION II: RULE VIOLATIONS

Consequences

- A. Participants in violation of Rule #1 shall be placed on academic probation for one week following the grade check in which he/she is receiving a failing grade. Participants may continue to practice and participate in games or activities during the probation period. If at the end of the one week probation the student is still receiving a failing grade in any class, then he/she will be ineligible to participate in games or competitions for one week and will continue to be ineligible until he/she has NO failing grades. Grade checks shall be checked on a week-to-week basis.
- B. Participants in violation of Rule #2 may not participate until they comply with the rule in its entirety.
- C. An administrator and/or coach or advisor will administer appropriate consequences for violations of rules, #3-11.
- D. Violations of Rules #12, 13, and 14 will be investigated for the following reasons:
 - 1. Confession by a student to staff/administrator
 - 2. Citation by police
 - 3. A signed letter by an adult in the community
 - 4. Written report by a staff member
 - 5. Reasonable cause

(In all cases, the Administrator will call parent/guardian for a meeting with student, parent, and administrator. The staff member or adult community member will be called if needed.)

SECTION III: RULE VIOLATIONS

Violations of Rules 9-11

First Violation:

- Exclusion from all club events or athletics for 25% of the season games/competitions and exclusion from the next non-athletic events or activities in which the violator participates.

Second Violation:

- Exclusion from all club events or athletics for 100% of the season games/competitions and exclusion from the next two non-athletic events or activities in which the violator participates.

Third and All Subsequent Violations:

- Exclusion from all extra-curricular activities and athletics for one full calendar year.



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Violation of Rules 12 & 13 (Alcohol, Tobacco or Drug Violation, Criminal or Civil Offense)

First Violation:

- The student/athlete may not participate for five (5) weeks or the remainder of the season, whichever is longer. This may be reduced by 50% if the student/athlete completes a drug and alcohol assessment and follows the recommendations of the assessment professional.

Second Violation:

- The student/athlete may not participate for one (1) calendar year.

Third Violation:

- The student/athlete may not participate for the remainder of their high school career.

The above sanctions shall be in addition to any judicial punishment from the state and/or county judicial system.

(A “competitive season” shall be defined as that portion of a sports season after which interscholastic participation with other school teams has commenced.)

Clarifications: For completion of all violations: Post season games will be counted toward the violation. The student/athlete will not be eligible to participate in post-season games unless the consequences have been served. Students will be allowed to practice during the violation period. Completion of all violations will carry over from season to season and school year to school year.

SECTION IV: APPEALS PROCESS

Violations can be appealed through notifying the Principal or Athletic Director. See handbook for more information.

Student’s Right to a Fair Hearing

When there is an alleged violation of the Activity/Athletic Code, a written notice from the Athletic Director or Advisor will be delivered by certified mail or in person to the student and their parent/guardian. The written notice shall include specific charges, the recommended sanction, and indicate the student’s right to a hearing provided the request is made within five (5) school days of receipt of the written notice. The hearing request is to be made in writing by the student and/or parent/guardian. The requested hearing shall be held within five (5) school days of the request.

The hearing shall be held before a hearing officer. All hearings and appeals must be attended by the student, parent/guardian, and the student may be represented by counsel. Those individuals making the allegations must attend the first hearing. The hearing and appeal shall not be a public hearing; however, coaching staff and others directly related to the alleged violation may attend the hearing.



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The hearing officer may announce his decision at the conclusion of the hearing or within two (2) school days. The student and parent/guardian will be notified in writing of the hearing officer's decision.

If the hearing officer finds the alleged violation occurred and a sanction is applied, the student may appeal the decision by giving written notice within three (3) school days of receipt of the decision. Within two (2) school days of the appeal, the hearing officer shall prepare a written synopsis of the hearing and forward the synopsis to the members of the appellate board, the hearing officer, the student, and the parent/guardian. Within five (5) school days of receipt of the notice, a hearing shall be held before the appellate board: a Superintendent, a school board member, and a member of the Thorp coaching or advisory staff.

The appellate board may continue its hearing for not more than one (1) day following the date the hearing first began.

The appellate board will announce their decision within three (3) school days following the conclusion of the appellate hearing. The student, parent/guardian, and the coach or advisor will be notified in writing of the decision.

ACTIVITIES/ATHLETICS GRADE ELIGIBILITY REQUIREMENTS **Grades 6 - 12**

The Thorp School District eligibility ladder has two steps:

Step 1

The student is placed on academic probation and will now be checked for progress on a weekly basis. The student is still eligible for turnout and game or activity participation. Once a student has reached Step 1, they remain there for the entire season.

Step 2

The second academic violation results in a suspension of team privileges. The student will be allowed to practice but will not be allowed to participate in games or activities for one week and will continue to be ineligible until he/she has NO failing grades. If the student meets the requirements needed to be removed from Step 2, the student will return to Step 1 until the next eligibility check.



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WIAA STUDENT ELIGIBILITY REQUIREMENTS

Website: www.wiaa.com

Athletics / Cheerleading

Student athletes and cheerleaders must meet eligibility requirements established by the Washington Interscholastic Activities Association (WIAA) and the Thorp School District. These include:

1. Age Limit – WIAA

Senior High School

- The student shall be under twenty (20) years of age on September 1 for Fall sports season; on December 1 for the Winter sports season; on March 1 for the Spring sports season.

Middle School

- The student shall not have reached his/her fifteenth (15th) birthday prior to September 1 of any year.

2. Student Enrolled in School

Students must be enrolled in the school they represent. Students enrolled in an approved private school or an alternative school program (home-based instruction for example) can participate on an athletic team if:

- those students would be eligible to enroll in school;
- the activity is not available at their regular school; and
- they meet other requirements of the WIAA.

3. Residence

The student shall be eligible when attending the public school in the school district in which his/her parent/guardian resides. Non-resident students must file the appropriate waiver and be approved by the Athletic Director before they are eligible to participate.

4. Season Limitations - WIAA

After beginning the 7th grade in school, students shall be allowed to participate in interscholastic contests only during six (6) interscholastic years. The student shall have only two (2) years of eligibility in the 7th and 8th grades. After entering the 9th grade, a student shall have four (4) consecutive years of interscholastic eligibility.



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Amateur Standing – WIAA

In order to maintain amateur standing, a student MAY NOT:

1. Accept merchandise of than \$500 in value per sport during any one calendar year (Aug 1-July 31);
2. Accept cash awards;
3. Enter competition under a false name;
4. Accept payment of excessive expense allowances over the actual and necessary expenses for an athletic trip;
5. Sign or have signed a contract to play professional athletics;
6. Play or have played on any professional team in any sports; or
7. Receive or have ever received, directly or indirectly, a salary or any other form of financial assistance from a professional sports organization or any of his/her expenses for reporting to or visiting a professional team.

RULES AND REGULATIONS

When you are participating in extracurricular activities, you are expected to exhibit pride in yourself and your school by your actions. You represent yourself, your team or club, and your school as you participate, perform and/or compete. The expectations for a person representing the school are higher than for non-participants. A high standard of discipline, appropriate behavior, socially acceptable dress and good grooming are necessary to develop and maintain team and individual spirit. Dress code for game days or competitions will be left to the discretion of each advisor or sport's coach. No torn or tattered clothing may be worn.

Regulations are a necessary part in establishing this desirable, positive spirit. These regulations will aid in building spirit and allow for the development of character, initiative and teamwork while still allowing for individual differences and rights.

The purpose of this handbook is to establish the policies, regulations, rights and responsibilities under which the Thorp coaches and students must operate.

TEAM SPIRIT

The mental attitude and the thinking of the competitor are of great importance in conditioning. Anyone creating disharmony on the team, exhibiting behavior that is detrimental to team morale, team decorum, or the safety of others, being disrespectful, unsportsmanlike, or acting contrary to the coach's or advisor's directions will be counseled and may face suspension or expulsion from the team for the remainder of the season.

Only those participants completing the season will be recognized at the season-end sports banquet and receive a letter in that sport. To be considered as "completing the season," an athlete must complete the sports season as an eligible member regardless of quarters played or points earned. A sports season includes any or all post-season play for which a team or individual qualifies.



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AWARDS AND RECOGNITION

Varsity athletes who complete a sports season and meet the requirements will receive a letter award and a certificate for the first sport in which they lettered. Athletes will receive a certificate for all sports in which they lettered. Recognition will be given for number of times lettered, being a member of a championship team, individual champions, and special awards presented by the school. The special awards will be limited to three (3) awards which will be the coach's choice.

Junior varsity athletes are recognized and will receive certificates from the coaches for their participation.

Coaches will be responsible for keeping an accurate record of each athlete's progress toward the letter award. The coach will be responsible for preparing the certificate of award to be presented to the student athlete. Letter awards will be available from the Athletic Director upon request from the coach.

To receive recognition in a sport, athletes are required to:

- complete the sports season;
- not reach any higher than Step 2 on the athletic discipline ladder;
- return or replace all equipment, uniform and gear checked out to them;
- be eligible under WIAA regulations.

If unable to complete a season for medical reasons, athletes may receive awards at the coach's discretion.

OBJECTIVES

1. To develop mental and physical excellence and understanding of the value of competition in our society:
 - through recognition of outstanding performance by emphasizing the educational value of trying to win and learning to compete.
2. To develop good citizenship and respect for rules and authority:
 - by developing principles of justice, fair play and good sportsmanship in the student; and
 - by providing the opportunity to adjust individual rules to the common goals of the overall program.
3. To promote and contribute to the goals of the total educational program:
 - through the development of physical fitness and realization that a healthy body increases the probability of effective learning; and
 - by providing a strong program that attracts student body interest and motivation in a positive learning atmosphere.
4. To provide a program of student participation, as well as planning and execution, to derive the greatest possible benefits, and to promote community interest and involvement in school activities:
 - by providing enjoyable experiences for participants and spectators; and
 - by establishing rules and standards that are within community expectations for activities.



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PRE-PARTICIPATION HEALTH HISTORY

Date of Exam: _____

Name of Student: _____ Birth date: _____

Street Address: _____ Mailing Address: _____

City/State/ZIP: _____

Phone: _____ Sport: _____

HISTORY

Yes No

1. a. Have you had any illness/injury recently, or do you have an illness/injury now?
- b. Have you had a medical problem, illness or injury since your last exam?
- c. Do you have any chronic or recurring illness?
- d. Have you ever had any illness lasting more than one week?
- e. Have you ever been hospitalized overnight?
- f. Have you had any surgery other than a tonsillectomy?
- g. Have you ever had any injuries requiring treatment by a physician?
- h. Do you have any organ missing other than tonsils (appendix, eye, kidney, testicle, etc.)?
2. Are you presently taking ANY medications (including birth control pill, vitamin, aspirin, etc.)?
3. Do you have ANY allergies (medicines, bees, foods, or other factors)?
4. a. Have you ever had chest pain, dizziness, fainting, passing out during or after exercise?
- b. Do you tire more easily or quickly than your friends during exercise?
- c. Have you ever had any problem with your blood pressure or your heart?
- d. Have any close relatives had heart problems, heart attack or sudden death before they were age 50?
5. Do you have any skin problems (acne, itching, rashes, etc.)?
6. a. Have you ever fainted, had convulsions, seizures or severe dizziness?
- b. Do you have frequent severe headaches?
- c. Have you ever had a "stinger" or "burner" or pinched nerve?
- d. Have you ever been unconscious, "knocked out" or passed out?
- e. Have you ever had a neck or head injury?
7. Have you ever had heat exhaustion, heat stroke, heat cramps, or similar heat-related problems?
8. Have you had asthma, trouble breathing, or cough during or after exercise?
9. a. Do you wear eyeglasses, contact lenses or protective eyewear?
- b. Have you had any problem with your eyes or vision?

(OVER)



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Yes No

- 10. Do you wear any dental appliance such as braces, bridge, plate, or retainer?
- 11. a. Have you ever had a knee injury?
- b. Have you ever had an ankle injury?
- c. Have you ever injured any other joint (shoulder, wrist, fingers, etc.)?
- d. Have you ever had a broken bone (fracture)?
- e. Have you ever had a cast, splint, or had to use crutches?
- f. Must you use special equipment for competition (pads, braces, neck roll, etc.)?
- 12. Has it been more than five (5) years since your last tetanus booster shot?
- 13. Are you concerned about your weight?
- 14. FEMALES: Have you had any menstrual problems?
- 15. Do you have any medical concerns about participating in your sport?

Student or Parent/Guardian Comments:

Only Examiner should write below this line.

Examiner's Comments on all "Yes" Answers (*Please refer to question number*):



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PHYSICAL EXAMINATION

Name of Student: _____ Date of Exam: _____
Age: _____ Grade: (circle one): 5 6 7 8 9 10 11 12
Pulse: _____ Height: _____ Weight: _____ Blood Pressure: _____
Visual Acuity: Left 20/____ Right 20/_____

Optional

Urinalysis: _____ Body Fat %: _____
HCT: _____ EST V02 Max: _____
Audiometry: _____

<u>Normal</u>	<u>Abnormal</u>
<input type="checkbox"/> 1. Head	<input type="checkbox"/> _____
<input type="checkbox"/> 2. Eyes (pupils), ENT	<input type="checkbox"/> _____
<input type="checkbox"/> 3. Teeth	<input type="checkbox"/> _____
<input type="checkbox"/> 4. Chest	<input type="checkbox"/> _____
<input type="checkbox"/> 5. Lungs	<input type="checkbox"/> _____
<input type="checkbox"/> 6. Heart	<input type="checkbox"/> _____
<input type="checkbox"/> 7. Abdomen	<input type="checkbox"/> _____
<input type="checkbox"/> 8. Genitalia	<input type="checkbox"/> _____
<input type="checkbox"/> 9. Neurologic	<input type="checkbox"/> _____
<input type="checkbox"/> 10. Skin	<input type="checkbox"/> _____
<input type="checkbox"/> 11. Physical maturity	<input type="checkbox"/> _____
<input type="checkbox"/> 12. Spine, back	<input type="checkbox"/> _____
<input type="checkbox"/> 13. Shoulders, upper extremities	<input type="checkbox"/> _____
<input type="checkbox"/> 14. Lower extremities	<input type="checkbox"/> _____

Assessment:
 Full participation
 Limited participation (describe limitations, restrictions):

Participation contraindicated (list reasons):

Recommendations (equipment, taping, rehabilitation, etc):

Examiner's Signature: _____ Examiner's Phone: _____
Print Examiner's Name: _____ Date: _____

(OVER)



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STATEMENT FOR CONTINUED PARTICIPATION

WIAA Regulation – Physical Examination: Prior to the first practice for participation in interscholastic athletics in a middle level school and prior to participation in a high school competition, a student shall undergo a thorough medical examination and be approved for interscholastic athletic competition by a medical authority licensed to perform a physical examination. This physical examination must include, but not be limited to:

- A. Documentation of a detailed review of the student’s medical history with special attention to presence or absence of cardiovascular/pulmonary risks and/or previous significant injury and rehabilitation.
- B. Documentation of satisfactory examination of the cardiopulmonary system.
- C. Documentation of satisfactory sport specific orthopedic screening examination.
- D. A written statement by the examiner as to the fitness of the student to undertake the proposed athletic participation, together with suggestion for activity modification if necessary.

Examiner’s Certification

I hereby certify that the above-named individual’s physical condition is adequate to participate in supervised interscholastic activities NOT CROSSED OUT BELOW:

Baseball	Dance/Drill	Soccer	Track
Basketball	Football	Softball/Fastpitch	Volleyball
Cheerleading	Golf	Swimming	Wrestling
Cross Country	Gymnastics	Tennis	Other _____

Examiner’s Signature: _____ Date: _____

Examiner’s Name (*Please print*): _____ Phone: _____

Medical authorities licensed to give physical examinations: Medical Doctor (MD); Doctor of Osteopathy (DO); Certified Nurse Practitioner (CRN); Medic – Physician Assistant (PA); Naturopaths (ND).



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KITTITAS-THORP ATHLETES ONLY



Parent registration

How do I sign up?

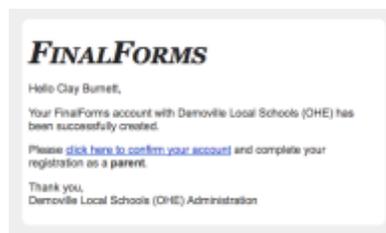
1. Go to: <https://kittitas-wa.finalforms.com>
2. Locate the parent icon and click **NEW ACCOUNT** below.



3. Type your YOUR NAME, DATE OF BIRTH, and EMAIL. Next, click **REGISTER**.

NOTE: You will receive an email within 2 minutes prompting you to confirm and complete your registration. If you do not receive an email, then check your spam folder. If you still can not locate the FinalForms email, then email support@finalforms.com informing our team of the issue.

4. Check your email for an **ACCOUNT CONFIRMATION EMAIL** from the FinalForms Mailman. Once received and opened, click **CONFIRM YOUR ACCOUNT** in the email text.



5. Create your new FinalForms password. Next, click **CONFIRM ACCOUNT**. 6. Click **REGISTER**

STUDENT for your first child.



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FINAL FORMS™

Registering a student

What information will I need?

Basic medical history and health information. Insurance company and policy number. Doctor, dentist, and medical specialist contact information. Hospital preference and contact information.

How do I register my first student?

IMPORTANT: If you followed the steps on the previous page, you may Jump to Step number 3.

1. Go to: <https://kittitas-wa.finalforms.com>

2. Click **LOGIN** under the Parent Icon.



3. Locate and click the **ADD STUDENT** button.

4. Type in the **LEGAL NAME** and other required information. Then, click **CREATE STUDENT**.

5. **If your student plans to participate in a sport, activity, or club**, then click the checkbox for each. Then, click **UPDATE** after making your selection. Selections may be changed until the registration deadline.

6. Complete each form and sign your full name (*i.e. 'Jonathan Smith'*) in the parent signature field on each page. After signing each, click **SUBMIT FORM** and move on to the next form.

7. When all forms are complete, you will see a 'Forms Finished' message.

IMPORTANT: If required by your district, an email will automatically be sent to the email address that you provided for your student that will prompt your student to sign required forms.

How do I register additional students?

Click **MY STUDENTS**. Then, repeat steps number 3 through number 7 for each additional student.

How do I update information?

Login at any time and click **UPDATE FORMS** to update information for any student.