

**JANESVILLE UNION SCHOOL DISTRICT
ATHLETIC AGREEMENT
2024-2025**

ATTENDANCE

1. Attendance at practice and contests is mandatory. Any athlete who misses practice or a game, who does not contact their coaches with a valid excuse the day of the absence, will not be allowed to participate in the next event. Schoolwork and serving detention are not valid excuses for missing practice; athletes should plan accordingly to avoid such conflicts.
2. Athletes are expected to remain with their coaches and team members in the facility during all events. They are under the direct supervision of their coaches and parent/guardians and are required to uphold the school's "code of conduct" when participating in sports. Athletes should avoid any conflicts with others and immediately report any problems to their coaches.

EQUIPMENT

1. The school is not responsible for personal items brought on campus or to the events.
2. Athletes who show up to practice or events without the required uniform/equipment will not be allowed to participate. Only the athlete to whom the uniform/equipment is issued may use those items.
3. Athletes are responsible for the cleaning and proper care of their issued uniforms/equipment during the sport or season. An athlete who loses or damages school uniforms/equipment shall be required to pay for that item.
4. Athletes who fail to return issued uniforms/equipment as directed by their coaches will not be allowed to participate in future activities (sports, dances, trips, etc.) until the uniforms/equipment is turned in or paid for.

ELIGIBILITY

1. An athlete must maintain a 2.0 citizenship and academic grade point average. Athletes will be placed on academic or citizenship probation based on their quarterly grades. Athletes will be immediately placed on citizenship probation if their grades fall below a "C" average. Athletes who do not have a 2.0 average in academics are eligible to acquire a *Statement of Understanding*, as noted in the Wildcat Handbook (see "Academic Probation").
2. If an athlete has a note from a doctor, excusing them from PE, they will not participate in sports until cleared by their physician.
3. In order for an athlete to participate in a practice or event, they **must** be present at school the entire day of the practice or event. Exceptions to this rule are medical and dental appointments; a valid note from the doctor **shall** be presented to the coach prior to participation. Should the practice or event fall on a Holiday or weekend, in order to participate, athletes must be present the entire proceeding day of the practice or event.

4. Janesville athletes represent the school and should serve as role models for younger students; therefore, athletes must maintain satisfactory behavior in and out of the classroom (3 or fewer disciplinary checks in one day). Athletes will be suspended from the game or event that day or a game or event later during the season, selected by the coach or administrator, if they fail to demonstrate appropriate behavior in class or on the playground.
5. Janesville School athletes are recognized for their good sportsmanship, a reputation we want to maintain, for that reason, behavior from the bench must be exemplary. Players are not allowed to question calls made by the referee and will not taunt or intentionally distract opposing team members. Players who participate in such behavior, determined by the coach, during practice or games, may be permanently suspended from the team. In the event a student is ejected from a game, or disciplined for severely negative behavior during a game, the student athlete will lose the privilege of playing for the rest of the game and the next game. The severity of the incident may result in the suspension from the remainder of a tournament or permanent suspension from the team at the discretion of coach(es), athletic director and school administration.
6. An important aspect of sportsmanship is team play and team membership. Team members will be taught how to treat each other with respect and coached to encourage each other during practice and competition. Athletes who participate in bullying, hazing, or practical jokes during practice or events or any other time outside of athletics, may be promptly removed from the team. Team players shall report all such cases immediately to the coach.
7. Any athlete that is found to have committed a Level D offense, as per the Wildcat Handbook, may be dismissed from the team or participation in the sport.

EARLY RELEASE

1. Athletes that require early release from school may have it granted if all of the following conditions are met:
Athletes must sign out through the attendance office prior to leaving for the event.
2. If an athlete has to leave early for a game, they are responsible for the work that is due the next school day.
3. If an athlete, with work due, leaves school early to participate in an event, they will be excluded from the next game. If the season is over, they will not be permitted to participate in another extracurricular activity: games, tournaments, honor trips, dances, etc.

PHYSICALS AND INSURANCE

1. All athletes who desire to take part in school sports must have a physical at least once every calendar year, certifying that they are in good health and fit to participate. A completed *Athletic Health Statement* **must** be given to the coach prior to participation in any open gyms, practices, games, tournaments, or other events.
2. Athletes are encouraged to schedule their physicals during the Summer Break so they will be covered for the following school year, which will provide ample time to make appointments and avoid delays in participation.
3. The school provides basic insurance.

TRANSPORTATION

1. Athletes are expected to arrange transportation with their parents/guardians for all practices, games, events, or tournaments. When the athletic contest is over, athletes must leave with their parents/guardians and are not allowed to hang around on school grounds following the event unless they are with their parents/guardians. Athletes may remain at the event with other parents if they give the coaches a note or other reasonable evidence, indicating the individual responsible for the athlete.
2. Students may only ride with parents, other than their own, who have completed insurance forms on file with the District Office and with proper paperwork filled out. Twenty-four hours' notice is requested so all paperwork can be taken care of. Prior to leaving for an event and after having been contacted by the parents, coaches will provide the office with a list of students who are riding with other parents/guardians, prior to leaving for an event.

Board Approved Date: 8-15-23

**JANESVILLE SCHOOL
ATHLETIC POLICY AGREEMENT**

SPORT: _____

Name of Student: _____

Address of Student: _____

Name of Parent/Guardian: _____

Home Phone: _____ **Cell Phone:** _____

I have read the Janesville Union School Athletic Policy Agreement.

Signed: _____ **Date:** _____

(Students Signature)

Signed: _____ **Date:** _____

(Parent/Guardian's Signature)

****Note to Parents/Guardians: Your presence at events is greatly appreciated by the athletes and coaches. Janesville Parents/guardians have always managed to keep the game in perspective and support good sportsmanship. The leadership and modeling that you give your children is valued.**

**JANESVILLE SCHOOL ATHLETIC DEPARTMENT
CODE OF ETHICS**

All representatives of Janesville School, Coaches, Players and Parents/Guardians agree to the following:

Coaches' Code of Ethics

- ❖ I will place the emotional and physical well being of my players ahead of a personal desire to win.
- ❖ I will treat each player as an individual, remembering the large range of emotional and physical development for the same age group.
- ❖ I will provide a safe playing situation for my players.
- ❖ I will review and practice basic first aid principles needed to treat injuries of my players.
- ❖ I will organize practices that are fun and challenging for all my players.
- ❖ I will lead by example in demonstrating fair play and sportsmanship to all my players.
- ❖ I will be knowledgeable in the rules of the game and I will teach these rules to my players.
- ❖ I will remember that I am a coach and that the game is for children, not adults.

Players' Code of Ethics

- ❖ I will encourage good sportsmanship from fellow players, coaches, officials and parents at every game and practice by demonstrating good sportsmanship myself.
- ❖ I will attend every practice and game that I can, and I will notify my coach if I cannot.
- ❖ I will do my very best to listen and learn from my coaches.
- ❖ I will treat my coaches, other players, officials, and fans with respect regardless of race, sex, creed, or abilities, and I will expect to be treated accordingly.
- ❖ I will encourage my parents to be involved with my team in some capacity because it is important to me.
- ❖ I will remember that sports participation is an opportunity to learn and have fun.

Parent/Guardians' Code of Ethics

- ❖ I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game and practice.
- ❖ I will place the emotional well-being of all team members ahead of my personal desire to win.
- ❖ I will support coaches and officials working with my child in order to encourage a positive and enjoyable experience for all.
- ❖ I will remember that the game is for youth, not adults.
- ❖ I will treat players, coaches, fans and officials with respect regardless of race, sex, creed or ability and expect my child to do the same.

Coach's Signature

Date

Player's Signature

Date

Parent/Guardian's Signature

Date

Board Approval Date:

Janesville Union Elementary School

ATHLETICS / SPORTS VOLUNTARY ACTIVITIES PARTICIPATION FORM
ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK

I authorize my son/daughter, _____ to participate in all
Janesville Elementary School sponsored athletics/sports.

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

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

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

**I understand, acknowledge and agree that the Janesville Elementary School, its elected or
appointed officials, employees, 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 and I voluntarily assume all risk, known or unknown, of
injuries, howsoever caused, even if caused in whole or in part by the action, inaction, or
negligence, of the released parties to the fullest extent allowed by law.**

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

Parent/Guardian

Date

Student Signature

Date

A signed VOLUNTARY ACTIVITIES PARTICIPATION FORM and AUTHORIZATION &
CONSENT FOR MEDICAL TREATMENT AND HEALTH INSURANCE VERIFICATION
FORM must be on file with the Janesville Elementary School before a student will be allowed to
participate in the above extra-curricular activities.

Janesville Union Elementary School

**AUTHORIZATION & CONSENT FOR MEDICAL TREATMENT
AND HEALTH INSURANCE VERIFICATION**

HEALTH INSURANCE:

Pursuant to Education Code 32221, the insurance shall provide the following coverage:
At least one thousand five hundred dollars (\$1,500) for all medical and hospital expenses.

I have health insurance that meets the requirements under the California Education Code Section 32221.

Athletic Team/Sport: _____

Student's Name: _____

Insured (Subscribers) Name: _____

Insurance Company: _____

Policy/I.D. Number: _____

California Education Code 32221.5: Some students may qualify to enroll in no-cost or low-cost local, state, or federally sponsored health insurance programs. Information about these programs may be obtained by calling Medi-Cal at 800-541-5555 or Healthy Families Program at 800-880-5305.

AUTHORIZATION & CONSENT FOR MEDICAL TREATMENT

In the event of an injury or illness to _____ while participating on the athletic team, I do hereby authorize the Janesville Elementary School, as agent for the undersigned, to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under, the general or special supervision of any physician and/or surgeon, whether such diagnosis or treatment is rendered at the office of said physician or at any medical facility.

It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power on the part of the aforesaid agent to give specific consent to any and all such diagnosis, treatment or hospital care which the aforementioned physician in the exercise of his/her best judgment may deem advisable.

This authorization shall remain effective through the conclusion of the sport season, including any playoff or championship competition, unless revoked in writing and delivered to said agent.

Parent/Guardian Signature: _____ Date: _____

**Athletic Health Statement
And
Parent/Guardian Consent/Medical Release Form**

Student's Name _____ Grade _____

The above student has a Physical on file from the current school year for the sport: _____

OR

I hereby certify that the above named student is physically fit to engage in interscholastic sports.

Physician's Signature

Date Signed

Title

State License Number

Parent/Guardian Consent/Medical Release Form

I hereby give consent for my child, named above, to compete in interscholastic sports. I authorize my child to go with and be supervised by a representative of the school on any trips. In case my child becomes ill or is injured, you are authorized to have him/her treated and I authorize the medical agency to render service.

Signature of Parent/Guardian

Date Signed

Print Parent/Guardian's Name

Mailing Address

Telephone Number (Home)

Telephone Number (Cell)

Telephone Number (Work)

Insurance Company

Policy Number

Insurance Company Phone #

Subscriber Number/Group Number