

OAKCREST/ABSEGAMI HIGH SCHOOLS
ATHLETIC PERMIT FORM

Please fill in all blank spaces on all pages of this form as it is retained in two separate offices.

Date: _____ Date of Last Physical: _____
Student's Name: _____ ID# _____ Sex: _____ Age: _____
Date of Birth: _____ Sport: _____ School: _____
Home Phone: _____ Grade: _____
Physician: _____ Phone: _____ Fax: _____

Emergency Contact Information:

Name: _____ Relationship: _____
Phone: Home _____ Cell: _____ Work: _____]
(If a work phone is a casino, please give department and/or extension)

Please be advised that a form must be submitted for each sport in which the student participates. I/We, the undersigned, parent/guardian of _____, hereby give consent for my son/daughter/ward to participate in interscholastic _____ for the Greater Egg Harbor Regional High School District. I am aware of the physical dangers in interscholastic athletic practices and games, and of the dangers involved in traveling to and from such events. I/We recognize that such activity involves the potential for injury, which is inherent in all sports. It is further acknowledged that even with proper supervision and/or coaching, the use of suitable and adequate protective equipment, premises kept in good condition and free from hazards, and strict observation of rules, injuries are still a possibility. On rare occasions, these injuries can be so severe as to result in total disability, paralysis or even death. I/We acknowledge that I/we have read and understand this warning. It is recognized that the Greater Egg Harbor Regional High School District is not responsible to pupils, parents or guardians for any accidents or injuries that may occur.

The undersigned further acknowledges that participants will be required to use after school time for practices and competitions. In some cases, the competition and/or practices are held away from school grounds. It is required that each participant pass a complete physical exam given by their own physician. Physical exams are good for one calendar year(365 days). This exam must be good for the entire season and cannot expire during the season. The student will be covered under the school sponsored accident insurance program and must pass the minimum requirements as set by the New Jersey State Interscholastic Athletic Association and the Greater Egg Harbor Regional High School District.

The undersigned further gives consent for school authorities to release the participant's grades to colleges and universities as a prospective applicant for those schools and to the "Press" as a possible candidate to their All-American team selections.

The undersigned hereby empowers and directs the coach, staff, and school authorities to authorize emergency medical treatment to my child in any case where such treatment is reasonably necessary in the judgment of the coach, staff, or school authorities. I/We understand that during school athletic events, contests, practice seasons, and activities, there are many occasions when a physician is not present. I hereby authorize the coach, staff, or school authorities to render first aid if an accident or injury takes place under the above circumstances.

DISTRICT ATHLETIC TEAM RULES

1. The proper conduct of all team members is a primary goal in athletics. Violations of acceptable standards of good conduct will bring disciplinary action in proportion to the severity of the offense.
2. Student athletes may not possess or use alcoholic beverages, narcotics, tobacco, marijuana, or other controlled substances, as defined by the laws of the State of New Jersey, in the school, on the school grounds or school bus. Such action will result in immediate or prompt dismissal from that team.
3. Attendance at all practices is necessary for all team members to attain success. There are legitimate reasons for absence, but they should be minimal and permission to miss practice must be cleared through the head coach or athletic supervisor.
4. An athlete will not be permitted to practice or play in a contest if the athlete has been absent from school that day, unless his absence has been cleared through the Vice Principal or, in his absence, the Supervisor of Athletics.
5. Athletes will not be permitted to practice or play while on suspension(in or out of school).
6. Athletes must meet all eligibility requirements as set by the Board of Education and the New Jersey Interscholastic Athletic Association. Eligibility requirements are listed in your student guidebook.
7. Any, and all injuries, must be reported to the coach as soon as possible.
8. Athletes and managers may not drive to any away athletic contest with anyone other than on the team bus, unless a written note of permission signed by the parent/guardian is given to the Athletic Director and/or head coach at least 24 hours before the athletic contest in question, unless there is an unavoidable emergency. A student may only be driven by a parent/guardian.
9. Initiation and hazing at any time are illegal and forbidden. All hazing incidents must be reported to the Director of Athletics. Appropriate disciplinary action will be taken.
10. Destruction of property; public, private, or school, will not be tolerated. Violators will be promptly disciplined and possibly removed from the team.
11. Betting and/or gambling are strictly forbidden. Appropriate disciplinary action will be taken.
12. Forgery of any portion of this document may result in forfeiture of participating in the athletic program.

STRENGTH AND CONDITIONING PROGRAM RECOMMENDATIONS

It is strongly recommended that your son/daughter participate in in-season and out-of-season strength and conditioning programs to help prevent injuries and improve athletic performance.

EQUIPMENT RESPONSIBILITY

1. Any and all equipment that is issued to your child becomes his/her responsibility.
2. If equipment is not returned at the close of the season, your son/daughter will be held accountable for that equipment.
3. If the athletic equipment is lost or stolen from your child during the season, the responsibility for that equipment still remains with your child and he/she may be held accountable for it, depending upon circumstances.

I have reviewed all the information on this form, and agree to the participation of my son/daughter in athletics under the conditions stated.

Student Signature

Date

Parent/Guardian Signature

Date