WINSTON-SALEM/FORSYTH COUNTY SCHOOLS	PARENT PERMISSION INTERSCHOLASTIC ATHLETICS					
Name of Parent/Guardian:	Student-athlete:					
Street Address:	School: Grade:					
City: State: Zip Code:	Date of Birth: Phone: Home - Work -					
Request for Permission: We, the undersigned student and the student's parent/guardian, apply for permission to participate in interscholastic athletics in the following sports:						
[] Basketball[] Golf[] Baseball[] Soccer[] Cross Country[] Softball[] Football[] Swimming	[] Tennis[] Cheerleading[] Track[] Lacrosse[] Volleyball[] Field Hockey[] Wrestling[] Field Hockey					
General Requirements- We have read and discussed the general requirements for high school athletic eligibility. We understand that additional questions or specific circumstances should be directed to my student's coach, athletic director or principal.						
Athletic Eligibility, Academics: A student must meet the NCHSAA academic standards and earn a 2.0 QPA the previous 9-week grading period. A student whose semester (7-period day schedule) or term (4-period day schedule) QPA is 2.0 or greater but whose 2nd or 4th 9-weeks QPA is below 2.0 will be eligible to participate if the student agrees to attend and attends weekly tutoring sessions during the subsequent 9 weeks. Likewise, a student whose 2 nd or 4th 9-weeks QPA is 2.0 or greater but whose semester or term QPA is below 2.0 will be eligible to participate if the student agrees to attend and attends weekly tutoring sessions during the subsequent 9 weeks. Likewise, a agrees to attend and attends weekly tutoring sessions during the subsequent 9 weeks. A student's grades in summer school shall be considered in determining a student's final QPA for the semester or term. If a student's QPA after summer school is 2.0 or greater, the student will be eligible to participate if the student agrees to attend and attends weekly tutoring sessions during the subsequent nine weeks. See Policy 6145 for information on Hardship Waivers.						
Athletic Eligibility – Attendance. A student who is absent more than 10 days in a semester shall be ineligible for participation in any inter-scholastic athletic activity during the next semester unless granted a hardship waiver. See Policy 6145 for information on Hardship Waivers.						
Athletic Eligibility – Change of Residence or Special Transfer. A student who changes his/her domicile to or within Forsyth County, as defined by the NCHSAA, or is granted a special transfer, during a sports season shall be ineligible for interscholastic athletics at the new school in the same sport for the remainder of that sport's season. If a student or a student's parent(s) believe that the application of this policy will create an undue hardship, they may request a waiver of the policy for a good and just cause in accordance with the athletic eligibility review procedures set forth in Policy 6145.						
Risk of Injury . We acknowledge and understand that there is a risk of injury involved in athletic participation. We understand that the student-athlete will be under the supervision and direction of a WS/FCS athletic coach. We agree to follow the rules of the sport and the instructions of the coach in order to reduce the risk of injury to the student and other athletes. However, we acknowledge and understand that neither the coach nor the WS/FCS can eliminate the risk of injury in sports. Injuries may and do occur. Sports injuries can be severe and in some cases may result in permanent disability or even death. We freely, knowingly, and willfully accept and assume the risk of injury that might occur from participation in athletics.						
Release- In consideration of the WS/FCS allowing the student-athlete to participate in athletics, we agree to release and hold the WS/FCS, its athletic coaches, and other employees free, harmless and indemnified from and against any and all claims, suits or causes of action arising from or out of any injury that the student-athlete may suffer from participation in athletics other than an injury resulting from gross or willful negligence.						
Insurance- School Board Policy 6145 requires that all students who participate in athletics be adequately covered by medical or accident insurance. We certify that we have purchased and will maintain in full force and effect during the student-athlete's participation in athletics the following insurance policy:						
Check One: [] School Accident Insurance [] Name of Other Insurance	Company: Policy No:					
Street Address:	Group No:					
City: State: ZIF	Policy Term, From: To:					
CERTIFICATION AND MEDICAL AUTHORIZATION. We certify that all of the information provided by us on this form is correct. We agree to abide by the rules of the NCHSAA. We give our consent for the student to receive a medical screening examination prior to participation in athletics. If the student-athletic is injured while participating in athletics and the WS/FCS is unable to contact the parent, we grant the WS/FCS permission and the authority to obtain necessary medical care and/or treatment for the student's injury, including first aid, medical or surgical treatment recommended by a physician and we accept the financial responsibility for such medical care or treatment.						

MEDICAL HISTORY			Family Physic	Family Physician:				
To be completed by parents and student together. A "YES" answer to any of the following questions will not automatically disqualify a student from participation in athletics.								
Will not automatically disquality a student from participation in athletics. Circle Answer 1. Has anyone in the athlete's family died suddenly before age 50? . 2. Has the athlete ever stopped exercising because of dizziness or passed out during exercise? . 3. Has the athlete ever been told that he/she has a heart murmur, heart problem or high blood pressure? . 4. Has the athlete experienced chest pains with exercise or felt any extra strong or irregular heart beats? . 5. Does the athlete have asthma (wheezing), hay fever, or coughing spells after exercise? . 6. Has the athlete ever had a broken bone, had to wear a cast, or had an injury to any joint? . 7. Does the athlete have a history of a concussion (getting knocked out)? . 8. Has the athlete ever suffered a heat related illness (heat stroke)? . 9. Does the athlete have a chronic medical problem or see a doctor regularly for a particular problem? . 10. Does the athlete have any paired organs (If yes, circle: eye, ear, kidney, testicle, ovary)? . 11. Does the athlete allergic to any medications? (If yes, what:						1. YES NO 2. YES NO 3. YES NO 4. YES NO 5. YES NO 6. YES NO 7. YES NO 8. YES NO 9. YES NO 10. YES NO 11. YES NO 12. YES NO 13. YES NO 14. YES NO 15. YES NO 16. YES NO		
Please explain any "YES" answers:								
DOCTOR'S EXAMINATION								
Height:		Weight:		Blood Pressure:	/	Pulse:		
Vision Rt: 20/		Vision Lt 20/		Vision Both 20/		Optional - Body Fat (%)		
ORGAN/SYSTEM	N	ORMAL		ABNC	DRMAL (Explain)	·		
Eyes/Pupils	1							
ENT	1							
Heart	1							
Lungs								
Abdomen								
Genitalia (If indicated)								
Musculoskeletal								
Neurological								
Skin								
LABORATORY (If indicated):								
DOCTOR'S CERTIFICATION: I, the undersigned physician, certify that I have examined this student and find him/her medically: [] qualified, [] qualified with conditions, or [] unqualified to participate in athletics. The conditions for qualification or the reason(s) for disqualification are stated below:								
Physician's Signature:			Street Address:					
Date: Telephone:			City:	State:	ZIP	:		
The following are considered disqualifying conditions until medical or parental releases are obtained: acute infections, obvious growth retardation, diabetes, jaundice, severe visual or auditory impairment, pulmonary insufficiency, organic heart disease or hypertension, enlarged liver or spleen, hernia, musculoskeletal deformity associated with functional loss, history of convulsions or concussions, absence of one kidney, eye or testicle.								

Code of Sportsmanship:- It is recognized that public school interscholastic athletic events should be conducted in such a manner that good sportsmanship prevails at all times. Every effort should be made to promote a climate of wholesome competition. Unsportsmanlike acts will not be tolerated. A player is under the coach's control from the time they arrive at the athletic field until they leave the field. The penalties listed in the North Carolina High School Athletic Association Handbook and the WS/FC School Sportsmanship/Ejection Policy will be adhered to for any athlete ejected from an athletic contest.

Protect Your Eligibility; Know the Rules: To represent your school in athletics, YOU:

1. **Must** be a properly enrolled student at the time you participate, must be enrolled no later than the 15th day of the present semester, and must be in regular attendance at that school.

2. **Must not** be absent more than **10 days** in a semester or term to be eligible for participation in interscholastic athletic activities during the next semester.

3. **Must** have not exceeded eight (8) consecutive semesters of attendance or have participated more than four (4) seasons in any sport since first entering grade nine (9).

4. Must be under 19 years of age on or before October 16.

5. **Must** live with your parents or legal custodian within the school administrative unit (exceptions must be approved by your principal and the NCHSAA. A student is eligible if he has attended school within that unit the previous two (2) semesters (if eligible in all other respects).

6. **Must** be present for a minimum of 50% of the student day on the day of an athletic contest in order to participate the event.

7. **Must** have passed a minimum of five (5) courses during the previous semester in the seven-period day schedule and earned a 2.0 Quality Point Average (QPA) the previous nine-week grading period or semester.

8. **Must** have passed a minimum of six (6) out of eight (8) classes during the previous term in the four-period day schedule and earned a 2.0 Quality Point Average (QPA) the previous nine-week grading period or term.

9. **Must** have received a medical examination by a licensed physician within the past 365 days; if you miss five (5) or more days of practice due to illness or injury, you must receive a medical release before practicing or playing.

10. **Must not** accept prizes, merchandise, money, or anything that can be exchanged for money as a result of athletic participation. This includes being on a free list or loan list for equipment, etc.

11. **Must not** have signed a professional contract, have played on a junior college team or be enrolled and attending a class in college.

12. Must not participate in unsanctioned all-star or bowl games.

13. **May not** receive team instructions from your school's coaching staff during the school year outside your sports season (from first practice through final games). Instruction is limited to coach and one or multiple participants in small group settings.

14. **May not**, as an individual or a team, practice or play during the school day (from first practice through conference tournament).

15. May not play, practice, or assemble as a team with your coach on Sunday.

16. May not dress for a contest, sit on the bench, or practice if you are not eligible to participate.

17. **Must not** play more than three (3) games in one sport per week (exceptions: Baseball, Softball, and Volleyball); and not more than one (1) contest per day in the same sport (exceptions: Baseball, Softball, and Volleyball).

18. May attend only those summer camps to which you or your parents paid the fees.

19. **Must** submit to random drug testing.

Alcohol/Drugs - To be eligible to participate in athletics, the student with the consent of his/her parents must agree in writing to submit to random alcohol and drug testing. In addition to testing students for alcohol, the students shall be tested for the presence of marijuana, cocaine, amphetamines, and any other drugs the superintendent deems appropriate as recommended by Step One. Information about the alcohol/drug testing policy, program and procedures is provided in a separate brochure which all athletes and their parents are expected to read.

Consequences of a positive test.

a. FIRST OFFENSE. In the event a student fails or refuses to participate in the alcohol/drug test when selected at random or tests positive for alcohol or drugs, the student shall be ineligible to participate in athletics for 365 days. However, if the student agrees to be assessed and to enroll in and successfully complete an alcohol and/or drug abuse education and/or intervention program, the student shall regain eligibility to participate in athletics immediately.

b. SECOND OFFENSE. In the event a student tests positive a second time or fails or refuses to participate in the second alcohol/drug test when selected at random, the student shall be ineligible to participate in athletics for 365 days.

c. The student shall not be suspended from school as a result of a positive test.

Possession, Use, Sale or Distribution. If an athlete possesses or is under the influence (to any degree) of alcohol or illegal drugs at school or any school activity, or if an athlete sells or distributes alcohol or a controlled substance, the athlete shall be ineligible for athletics for a minimum of 30 school days in addition to being subject to suspension or expulsion from school as provided in Policy 5131.6 and AR 5131, Guidelines for Student Discipline.

By signing the form below I, the student, and I, the student's parent, acknowledge that we have read the information provided to us by WS/FCS explaining the WS/FCS Policy and procedures for random alcohol and drug testing. I, the student agree to participate in random alcohol/drug testing and I authorize WS/FCS, its agents or employees to release the results of my alcohol/drug test to me, my parent and appropriate school officials. I, the student's parent, give my consent for my child to participate in WS/FCS's random alcohol/drug testing program.

NCHSAA REGULATIONS STUDENT ATHLETE PLEDGE: As a student athlete, I am a role model. Using inappropriate language; taunting; baiting; or the use of unwarranted physical contact directed at opposing players, coaches, and fans are contrary to the spirit of fair play and the good sportsmanship my school, my conference, and the NCHSAA expects of its members. I accept my responsibility to model good sportsmanship that comes with being a student athlete.

PARENT PLEDGE: As a parent, I am a role model. I will remember that school athletics are an extension of the classroom, offering learning experiences for the students. I will show respect for the opposing players, coaches, spectators and support groups. I will participate in cheers that support and uplift the teams involved. Using inappropriate language and taunting are contrary to the spirit of fair play and the good sportsmanship our school, our conference and the NCHSAA expects of its members. I accept my responsibility to model good sportsmanship that comes with being the parent of a student athlete.

I certify that the home address as parents shown in this document is my sole bona fide residence and I will notify the school principal immediately of any change in residence, since such a move may alter the eligibility status of my student-athlete. All other information contained in this form is accurate and current.

NCHSAA SPORTSMANSHIP/EJECTION POLICY

We acknowledge that student parent and we whose names appear below, have read and understand the NCHSAA and the WS/FC Schools Sportsmanship/Ejection Policy. We understand that the following types of behavior will result in an ejection from an athletic contest: fighting, taunting or baiting, profanity directed toward an official or an opponent, obscene gestures, disrespectfully addressing or contacting an official.

- 1st ejection: 4 games suspension in all sports *except* 2 games for football
- 2nd ejection: Suspended for remainder of sport season
- 3rd ejection: Suspended from all athletic competition for 365 days from date of 3rd ejection

I, the undersigned student and parent, have read this document and understand all of the expectations for athletic participation at my high school.

Student:	Date:		
Parent/Guardian	Date:		
Additional Information:			