

# Bear Creek Middle School

*The mission of the Bear Creek Middle School Athletic Department is to inspire self-confidence and endure excellence through achievement in athletics while providing a high quality positive experience in conjunction with members of the community.*



Athletic Handbook 2022-2023

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# WELCOME

We are excited that your child is interested in athletics at Bear Creek Middle School. Being part of BCMS Athletics will prove to be a memorable experience that your child will remember the rest of his/her life. All coaches are thrilled with the opportunity to teach your child the skills necessary to be successful in a particular sport as well as instilling crucial life skills aiding the athlete to be a successful young adult. Please do not hesitate to contact myself or any coach so that we can work together to offer what is best for our adolescents.

Dr. Suzy Wallin



Athletic Director

## SCHOOL INFORMATION PAGE

Bear Creek Middle School  
*Home of the Grizzlies*  
228 Jefferson Street  
Telephone – 770.725.5575  
Statham, Georgia 30666  
[www.barrow.k12.ga.us/bcms](http://www.barrow.k12.ga.us/bcms)

Principal- Dr. Lauren Carter  
Assistant Principal- Dr. Shane Lancaster  
Receptionist-Celita Tanksley  
Mascot-Grizzlies  
Colors-Green and Silver  
Enrollment-600+

## WHO TO CONTACT FOR INFORMATION

Athletics	Dr. Suzy Wallin
Attendance	Ms. Alicia Lunceford
Discipline	Dr. Kenneth Lancaster
Extracurricular Activities	Dr. Suzy Wallin
Fundraising Information	Dr. Lauren Carter
Finances	Ms. Angela Welch
Social Media	Ms. Christa Minak

## HEAD COACHES AND SPONSORS

Principal  
Assistant Principal  
Athletic Director  
Basketball (Boys)  
Basketball (Girls)  
Cheerleading  
Cross Country  
Football  
Track  
Volleyball

Dr. Lauren Carter  
Dr. Shane Lancaster  
Dr. Suzy Wallin  
Mr. Bobby Wirsing  
Ms. Felecia Towler  
Ms. Amber Mann  
Dr. Suzy Wallin and Ms. Emily Phillips  
Mr. Troy Moon (RMS)/ Mr. Jeff Blankenship  
Dr. Suzy Wallin/ Mr. Corey Holland  
Ms. Felecia Towler

## EXPLANATION OF OUR ATHLETIC PROGRAM AND HANDBOOK

This booklet explains thoroughly our BCMS athletic programs, teams and guidelines for participation. It is your responsibility, parents and students, to read and study this information and understand your son/daughters commitment to our program, and our resolve to support them. We take this privilege of coaching very seriously, and we work hard to provide the best possible environment and program.

The following pages contain forms which MUST be completed BEFORE your son/daughter may practice or participate with any athletic team or activity. All forms must be returned to the Head Coach of each particular sport or activity to be kept in a centralized file in the athletic office for two years. You may keep the remainder of the booklet for your information and reference.

The remainder of the information presented covers Bear Creek Athletic Department and team guidelines, rules and regulations, and general information which is important to guide our student-athletes through their middle school academic and athletic career.

Any questions or concerns you may have concerning any of the information provided in this handbook for our student-athletes should be directed to the Director of Athletics or the Head Coach of your child's particular sport.

## FORMS FOR PARTICIPATION

Forms included in the back of this handbook must be completed for your child to participate in the Bear Creek athletic program.

All forms should be thoroughly signed, dated and returned all to the Head Coach of the sport.

### PRE-PARTICIPATION EXAMINATION AND CLEARANCE

All athletes must have a physical exam by a licensed medical physician. This completed exam is good for one calendar year. All exams must be on the mandated GHSA attached form.

### CONSENT, AUTHORIZATION, INSURANCE, CODE OF CONDUCT

This form contains information regarding the following: consent for participation, authorization for medical care, and acknowledgment of our code of conduct.

### STUDENT/PARENT CONCUSSION AND CARDIAC ARREST AWARENESS

These two forms satisfy House Bill 284 and SB 60 regarding notification of concussion management and cardiac arrest.

### SOCIAL MEDIA POLICY AND GUIDELINES

These guidelines and they communicate the BCMS policy regarding social media.

### EMERGENCY

This form allows our trainer and/or coaches to make the decision to transport your son/daughter and allow hospital staff to treat your son/daughter in the event you can not be contacted.

## STUDENT ATHLETE CLASSROOM SUCCESS

Success in the classroom must and always will be our top priority here at Bear Creek. Our coaches expect and demand ALL our student athletes strive for knowledge and produce passing grades, and at the same time, develop a winning attitude in all walks of life. A successful student strives to pay attention and to concentrate on school related tasks. They can block out distractions from the environment around them that will interfere with their successful learning. The ability to be successful in the classroom often translates to the student's ability to feel success in their sport.

### STUDENT'S ROLE

Students can make a major difference in their academic success by developing positive study habits as well as having a positive attitude. Athletes should make sure to set aside time each week in order to study so they may continue in their learning.

Athletes are expected to adhere to all teachers expectations making sure to communicate often when concerns occur.

Students can make a major difference in their academics by doing the following:

- participating in class activities
- utilizing class time wisely
- keeping up with class assignments and assessments
- studying consistently
- consistently communicating with their teachers

### FAMILIES' ROLE

How can you help our athletes become more successful students? Certain skills, attitudes and behaviors characterize successful people. Helping your young adult to learn these skills can, in turn, help them to achieve their academic goals.

ALL of us, working together (parents, students, teachers, coaches, counselors, administrators, etc.), can insure great academic success and success in life for your son and/or daughter.

## STUDENT ATHLETE SPORT SUCCESS

Success on the court, field, track, etc... is extremely important. Being successful often depends on the person and team. Bear Creek prides itself on working with our student athletes to ensure that each student reaches their athletic potential. Depending on the sport, student athletes all have a role to fill in a variety of ways.

### STUDENT'S ROLE

Students can make a major difference in their sport by doing the following:

- developing a positive attitude with coaches and teammates
- communicating with coaches and teammates
- adhering to all specific team rules and regulations
- adhering to school PBIS expectations to deter negative discipline
- adhering to school attendance expectations
- supporting their teammates
- participating in fundraising

### FAMILIES' ROLE

How can you help our athletes become more successful in their sport? Communication is a very important part of success. Make sure to talk to your child during the season regarding their strengths and weaknesses. Listening is an important part of supporting our athletes.

If you would like to discuss your child's success, please remember to contact the coach. Each coach at Bear Creek has their own coaching philosophy. The Head Coach of a particular sport may also make additional requirements and this is encouraged by the Principal and Athletic Director.

## **SPORTSMANSHIP**

It is the responsibility of all participants in a contest, to include but not limited to players, managers, trainers, coaches, administrators, teachers, parents, fans, etc. to conduct themselves in such a way and to use every means possible to promote and value good sportsmanship in our games, events and contests.

### **STUDENT'S ROLE**

Students are to conduct themselves as athletes of character at all times. Student athletes are expected to show respect for opposing players, coaches, parents, students, and other members of the school. Student athletes are also expected to do the same for their own team. Student athletes should be a positive role model for others. Any student athletes who exhibit negative sportsmanship will be warned and further disciplinary action could occur.

Please refrain from shouting negative comments at the coaches, players, and fans. Please remember to share any concerns of possible unsportsmanship with your coach.

### **FAMILIES' ROLE**

Families are to conduct themselves in a manner that encourages their team. Families should remember that our student athletes need support; athletes are going through a learning experience and mistakes can occur. Families are expected to show respect for opposing players, coaches, parents, students, and other members of the school. Families are also expected to do the same for their own team.

Please refrain from shouting negative comments at the coaches, players, and fans. Please refrain from approaching the coach(es) before, during, and after the athletic activity; consider meeting with a coach(es) by appointment to discuss concerns.

Any family member that showcases negative sportsmanship will be warned. After this, if another incident occurs the family member will be asked to leave the athletic event. If future patterns occur, the member may be asked to not return to any athletic event for the season.

## **ATHLETIC PARTICIPATION RULES, REGULATIONS, AND GUIDELINES**

### **PURPOSE OF EXTRACURRICULAR ACTIVITIES**

The purpose of the Bear Creek Athletic Department and the North East Georgia Middle School Athletic Association is to develop strong character in our student-athletes and to prepare them for their future after they leave our school. This part of their middle school life emphasizes academic excellence, discipline and high moral standards.

### **TEACHERS/COACHES**

The coaches who lead these young people are teachers first. They are part of the Bear Creek family because they are ALL excellent teachers who care about their students, and they are willing to work hard to provide the most successful environment possible.

### **GOVERNING ASSOCIATIONS**

The extracurricular activities and athletics for the Barrow County School System and Bear Creek Middle School are set forth by the State of Georgia Department of Education, The Georgia High School Association, Barrow County Board of Education, and the North East Georgia Middle School Association.

### **GENDER EQUITY POLICY**

In accordance with federal and state law, the Barrow County Board of Education prohibits discrimination on the basis of gender in its interscholastic athletic programs. No student in the Barrow County School System shall be excluded from participation in, be denied the benefits of, be treated differently from another student or otherwise be discriminated against on the basis of gender in any interscholastic athletic program offered by the Barrow County School System. Separate teams will be offered for male and female students only where selection for such teams is based on competitive skills or the activity involved is a contact sport.

The Barrow County School System shall undertake all reasonable efforts to provide equal athletic opportunities for members of both genders. The school system Sports Equity Coordinator shall ensure that the school system regularly assesses its athletic programs to determine whether there are equal athletic opportunities for members of both genders.

# STUDENT ATHLETE EXPECTATIONS

## UNIFORMS

BCMS will make every effort possible to provide a uniform for athletes. Athletes should take care of any uniform. Under NO circumstance shall an athlete keep a school bought/provided uniform. Any fundraising using the school name to purchase uniforms belongs to the school, and athletes can not keep the uniform. In the event the athlete damages beyond repair or does not turn in an assigned school bought uniform, the athlete is responsible for paying the full price to replace. Under certain circumstances some coaches may require athletes to purchase their own uniform. In this case, the student of course is responsible for their own uniform.

Any other item such as a team t-shirt or jacket may be bought by athletes but will not be provided by the school. In the event a team wins a league championship, then a T-shirt may be bought for athletes.

## ATHLETIC FINANCES/FEES/LOSS of EQUIPMENT

There is an **athletic fee to participate in each sport at BCMS.** Basketball/Volleyball= \$75; Track/Cross Country= \$50; Cheerleading= \$25. This money is used for uniform/equipment maintenance, new equipment/supplies, competition entry fees, officials, some transportation costs, etc. **This money is due before the first athletic competition** in order to dress out with the team. Please contact the coach if a payment plan is needed.

Each coach may research to find affordable options for shoes, spirit wear. Please consult with the coach on shoe/equipment suggestions before buying. A specific type of shoe may be required for safety reasons, but all spirit wear is strictly optional.

All athletes must return all designated uniforms and equipment issued by the Head Coach of the sport of their participation. It is the responsibility of the student-athlete to find and return the equipment, uniform, etc., or the athlete will be charged for the amount of the equipment lost and or not returned. Once again, athletes are responsible for ALL materials issued to them.

## USE OF ELECTRONICS

In accordance with school system rules, no radios, music boxes, cell phones, etc. will be allowed on athletic travel buses or in facilities where Bear Creek Middle school athletic events are being held. The ONE exception will be a system where headphones are used so that any sound or music will not and can not be heard by anyone else. A cell phone may be used upon arrival home to arrange a ride and/or pick up from the school.

## ATHLETIC AWARDS

Individual sports and clubs may choose to hold individual team banquets, picnics or team gatherings for their respective teams, coaches and participants.

The Georgia High School Association will allow only customary certificates, trophies, plaques and awards letters. Any item beyond that may not be purchased for any athlete by the school, school system, or any organization which represents the school.

## ATHLETIC TEAM DRESS AND BEHAVIOR

Bear Creek Middle School athletic teams will dress appropriately at all times. Sloppy and outrageous attire will not be worn by Bear Creek Middle School student-athletes when traveling to and from away games. Team members will conduct themselves as responsible young gentlemen and young ladies following ALL school rules. In all athletic practices and contests, jewelry CAN NOT be worn in accordance with the Georgia High School Association and the National High School Federation rules and by-laws. This includes watches, necklaces, earrings, body piercings of any manner, etc.

When traveling to away games and contests. The Head coach of the sport will determine dress while representing Bear Creek at a contest or team function.

## TRAVELING EXPECTATIONS

### TO AND FROM CONTESTS

All teams and team members will travel to and from away games, contests and matches by transportation provided by the Barrow School System. The general rule is that if you leave with the team, you return with the team. Exceptions include:

- A serious emergency situation arises, by which the athlete AND his/her parents must give verbal permission to the coach in charge.
- If a parent is talking their child from the contest, then they must check out with the coach by signing out the athlete. **A student may ride home with another adult/parent with written permission from their parent.**

### TO AND FROM PRACTICE

We have many of our venues for practice and contests at off-campus sites. If a bus can not be provided, it is the student/parents responsibility to transport, or arrange transportation for your son/daughter to and from practice at our off-campus sites.

## STUDENT ATHLETE EXPECTATIONS

### QUITTING A SPORT

Once a student goes out for a sport, we strongly encourage them to complete their responsibility to their teammates and that sport.

**Any student-athlete who quits that sport before the end of the respective season, may NOT try out or practice with another sport until the original sport season is completed.**

The only exception is the Head Coach of the original sport has the option to release them from their obligation to the original sports and its team.

### DISMISSAL FROM A TEAM AND/OR ACTIVITY

Whether a student-athlete's behavior, attitude or other circumstances warrant his /her removal from an athletic team, this is left to the discretion of the Head Coach of that particular sport, the Athletic Director and/or the Principal.

If a student-athlete is dismissed from a team because of discipline problems or infractions of team rules, he/she may appeal to the Head Coach of the particular sport, the Athletic Director, and Principal for reinstatement. Some form of sincerity must be shown for reinstatement to be considered. Any possible form of reinstatement may also be accompanied by conditions as set forth by the Head coach for restitution or insurance of sincerity.

Any conduct that is detrimental to the team, as considered by the Head Coach and/or the Leadership of the school, may result in removal from the team and /or the Athletic Program. Disciplinary action MAY be taken from the school pending on the nature of the offense.

## DISCIPLINE

### AWAY FROM SCHOOL/OFF CAMPUS

All student-athletes are subject to disciplinary action and/or dismissal from the athletic program for any violation of the Barrow County School System or Bear Creek Code of Conduct not just while participating in school activities and functions, but OFF CAMPUS and AWAY FROM SCHOOL activities as well. If any student-athlete has legal charges filed against them, the Barrow County School System and Bear Creek Middle School reserves the right to withhold that student from participation until those charges are adjudicated. Our student-athletes are participating in an extracurricular activity that represents not only themselves, but their family, school and community as well. Each student-athlete is responsible for this program in regards to their actions at all times.

### DURING SCHOOL

The Athletic Department at Bear Creek Middle School, its coaches and teachers, expects and demands all of its student-athletes to be students first. Along with this requirement, it is expected that discipline and behavior in the classroom must be of the highest respect and honor at ALL times. Student-athletes also will be aware of the Positive Behavior Support plan implemented per grade level as far as rewards, incentives, as well as consequences for their behavior. **Athletes should be the people who set the best example for the remainder of the student body in the classroom.** All student-athletes are expected to follow the Barrow County Student Code of Conduct. The Athletic Department reserves the right to punish school-time discipline problems caused by its athletes over and above the normal disciplinary procedures.

If a student athlete is assigned ISS, that athlete **can not attend** any after school activity during that assignment. For example, if a student athlete is assigned ISS on Monday and Tuesday of a particular week, then the student may return to the team and participate starting Wednesday. If a student serves ISS on a Friday, then the student may return on Saturday if competition or practice occurs. If not, then the student can return on Monday. Any student that is assigned more than two ISS assignments while a member of a team will be dismissed. Any student assigned OSS while a member of a team will automatically be dismissed from the team. Exceptions will only be considered by BCMS Principal, Assistant Principal, Athletic Director, and Coach.

## LOCATIONS

All student athletes are expected to be in the location where their sport is taking place. Any athlete found in an unauthorized area without permission will be written up for BEING OUT OF AREA. The consequence is usually ISS. The athlete will also be given consequences from the coach.

Specifically, the weight room which is located in the activity room in the gym is **STRICTLY off limits for athletes unless a BCMS coach has given the athlete permission to use.** Athletes will be supervised by his or her coach at all times. While using the weight room, athletes must follow all rules given by the coach and posted in the weight room.



# ELIGIBILITY

## ACADEMIC ELIGIBILITY REQUIREMENTS

Students in the Barrow County Schools System must meet certain requirements in order to participate in extracurricular activities. As provided in the section above, a student must meet ALL requirements to be eligible for participation in any extracurricular activity. A summary of these requirements is given below:

- ★ A student is eligible to participate one year in the 7<sup>th</sup> grade and one year in the 8<sup>th</sup> grade. This applies to the first year a student enters that grade. Participation means as a player or as a manager.
- ★ An eighth grader must not turn 15 prior to May 1st of the 7<sup>th</sup> grade year. A 7<sup>th</sup> grader must not turn 14 prior to May 1st of the 6<sup>th</sup> grade year.
- ★ **All students must pass five subjects the semester prior to participation in order to be eligible; however, for schools offering courses with year long grading, the second semester grade will be the grade given for the entire course and shall include the end-of-course test grade.**
- ★ A student may play on one team and only one team during participation in that sport, except when that sport is not offered for his or her grade level.

## SCHOOL DAY ATTENDANCE ELIGIBILITY

A student must be in attendance in school the day of a game and/or contest a minimum of one half of the school day to be eligible to participate in that day's contest. For the current year, a student would have to be in attendance for a total of three and a half hours to be considered half day.

## SIMULTANEOUS SPORTS ACTIVITIES

No Bear Creek Middle School athlete may participate in another GHSA sanctioned sport's practices or games until the original sports season is complete (unless approved by the two sport's Head Coaches and the Athletic Director). This rule covers overlapping seasons. No Bear Creek Middle School athlete may compete simultaneously on a middle school team (in one sport) and a recreation or outside team (or other organizations outside the school) in another sport simultaneously without the approval of the coach of the particular sport involved and the Athletic Director.

## QUESTIONS ABOUT ACADEMIC ELIGIBILITY FOR EXTRACURRICULAR ACTIVITIES

Any questions about eligibility issues should be directed to Suzy Wallin, Director of Athletics.

### LOSS OF ELIGIBILITY

Students assigned to an alternative school or out of school suspension for disciplinary reasons, or adjudicated to a YDC, lose their eligibility. The Barrow County Schools also include the length of time for assigned In-School Suspension.

### RESIDENCY AND ELIGIBILITY

A school service area/attendance zone for public schools are those attendance boundaries established by our Board of Education from which a school normally draws its students. As a school, we will only allow those students who live in the Bear Creek attendance zone or those students who are legally allowed by the Barrow County School System to participate in GHSA sponsored activities. There are many rules which apply to moving from one school to another, and from one attendance zone to another. Please be aware that any student found to be not residing within our zone, and participating in an activity due to full information not being divulged, will automatically be ruled ineligible for further participation, and until a full investigation of their place of residence is made. The GHSA has a process for each student. Bear Creek Middle School will abide by the rules and regulations of the Georgia High School Association and the Barrow County Board of Education in regard to the residency and eligibility of a student.

## BEAR CREEK ATHLETIC PROGRAM SUBSTANCE ABUSE GUIDELINES

The use of any alcohol, tobacco products, electronic cigarettes, or illegal chemical substances will not be tolerated or allowed by any student-athlete of Bear Creek Middle School either on campus or off campus. Upon report of such substances of use or abuse, the Head Coach of the sport for which the student-athlete is currently involved and the Athletic Director will investigate and institute such punishment as may be deemed necessary by policy. If the student-athlete involved in the instance of substance abuse is not participating in a sport currently in-season, then the Head coach(s) of the sport(s) in which he/she participates will follow the same process along with the Athletic Director. Appropriate discipline will be administered with respect to the severity of the offense.

**The student athlete will most likely be excused from the athletic team if found using any alcohol, tobacco products, or illegal chemical substances.**

## ATHLETIC HANDBOOK CONFIRMATION

The signatures below confirm that you have read the entire Athletic Handbook and you consent to athletic participation, medical authorization, verification of insurance coverage, code of conduct, social media policy/guidelines, as well as permission to use the athletes picture and/or video on our school website, and all other forms of media available to Bear Creek Middle.

**Athlete:** By signing, I understand that it is a privilege to participate on a Bear Creek Middle School Athletic Team. I will follow school, athletic, and team rules, and I understand that I will be required to serve consequences for any deviation set forth by school, athletic, and team rules. I have thoroughly read and understand the information especially on concussion management/cardiac arrest and Bear Creek Middle School Athletic Handbook.

**Parent:** By signing, I understand that it is a privilege for my child to participate on a Bear Creek Middle School Athletic Team. I have thoroughly read and understand the Bear Creek Middle School Athletic Handbook, and I realize my child will be required to follow school, athletic, and team rules. I have also thoroughly read and understand the information especially on concussion management/cardiac arrest. The coach has the authority to assign necessary consequences for not following these rules. I also understand that I will be expected to follow good sportsmanship etiquette as a fan and spectator at games and practice.

Athlete Full Name \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

*Please return this page and all forms to your child's coach.*



## FORMS FOR PARTICIPATION

All forms should be thoroughly signed, dated, and returned all to the Head Coach of the sport.

Please  check off that the forms are included.

<b>PRE-PARTICIPATION EXAMINATION AND CLEARANCE</b> (2)  <input type="checkbox"/>	<b>CONSENT, AUTHORIZATION, INSURANCE, CODE OF CONDUCT</b> (1)  <input type="checkbox"/>	<b>STUDENT/PARENT CONCUSSION AND CARDIAC ARREST AWARENESS</b> (2)  <input type="checkbox"/>	<b>SOCIAL MEDIA POLICY</b> (1)  <input type="checkbox"/>	<b>EMERGENCY FORM</b> (1)  <input type="checkbox"/>
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**PRE-PARTICIPATION EXAMINATION/CLEARANCE FORM #1**

Name: \_\_\_\_\_

Date of Exam: \_\_\_\_/\_\_\_\_/\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

Sex: M F Age \_\_\_\_ Grade for 2020-2021 7 8 9 10 11 12 School: **BCMS** Sport(s): \_\_\_\_\_

Medicines and Allergies: Please list all of the prescription and over-the-counter medicines and supplements (herbal and nutritional) that you are currently taking \_\_\_\_\_

Do you have any allergies?  Yes  No If yes, please identify specific allergy below.  
 Medicines  Pollens  Food  Stinging Insects

GENERAL QUESTIONS	Yes	No
1. Has a doctor ever denied or restricted your participation in sports for any reason?		
2. Do you have any ongoing medical conditions? If so, please identify below: <input type="checkbox"/> Asthma <input type="checkbox"/> Anemia <input type="checkbox"/> Diabetes <input type="checkbox"/> Infections Other: _____		
3. Have you ever spent the night in the hospital?		
4. Have you ever had surgery?		
HEART HEALTH QUESTIONS ABOUT YOU	Yes	No
5. Have you ever passed out or nearly passed out DURING or AFTER exercise?		
6. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?		
7. Does your heart ever race or skip beats (irregular beats) during exercise?		
8. Has a doctor ever told you that you have any heart problems? If so, check all that apply: <input type="checkbox"/> High blood pressure <input type="checkbox"/> A heart murmur <input type="checkbox"/> High cholesterol <input type="checkbox"/> A heart infection <input type="checkbox"/> Kawasaki disease Other: _____		
9. Has a doctor ever ordered a test for your heart? (For example, ECG/EKG, echocardiogram)		
10. Do you get lightheaded or feel more short of breath than expected during exercise?		
11. Have you ever had an unexplained seizure?		
12. Do you get more tired or short of breath more quickly than your friends during exercise?		
HEART HEALTH QUESTIONS ABOUT YOUR FAMILY	Yes	No
13. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 50 (including drowning, unexplained car accident, or sudden infant death syndrome)?		
14. Does anyone in your family have hypertrophic cardiomyopathy, Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia?		
15. Does anyone in your family have a heart problem, pacemaker, or implanted defibrillator?		
16. Has anyone in your family had unexplained fainting, unexplained seizures, or near drowning?		
BONE AND JOINT QUESTIONS	Yes	No
17. Have you ever had an injury to a bone, muscle, ligament, or tendon that caused you to miss a practice or a game?		
18. Have you ever had any broken or fractured bones or dislocated joints?		
19. Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast, or crutches?		
20. Have you ever had a stress fracture?		
21. Have you ever been told that you have or have you had an x-ray for neck instability or atlantoaxial instability? (Down syndrome or dwarfism)		
22. Do you regularly use a brace, orthotics, or other assistive device?		
23. Do you have a bone, muscle, or joint injury that bothers you?		
24. Do any of your joints become painful, swollen, feel warm, or look red?		
25. Do you have any history of juvenile arthritis or connective tissue disease?		

MEDICAL QUESTIONS	Yes	No
26. Do you cough, wheeze, or have difficulty breathing during or after exercise?		
27. Have you ever used an inhaler or taken asthma medicine?		
28. Is there anyone in your family who has asthma?		
29. Were you born without or are you missing a kidney, an eye, a testicle (males), your spleen, or any other organ?		
30. Do you have groin pain or a painful bulge or hernia in the groin area?		
31. Have you had infectious mononucleosis (mono) within the last month?		
32. Do you have any rashes, pressure sores, or other skin problems?		
33. Have you had a herpes or MRSA skin infection?		
34. Have you ever had a head injury or concussion?		
35. Have you ever had a hit or blow to the head that caused confusion, prolonged headache, or memory problems?		
36. Do you have a history of seizure disorder?		
37. Do you have headaches with exercise?		
38. Have you ever had numbness, tingling, or weakness in your arms or legs after being hit or falling?		
39. Have you ever been unable to move your arms or legs after being hit or falling?		
40. Have you ever become ill while exercising in the heat?		
41. Do you get frequent muscle cramps when exercising?		
42. Do you or someone in your family have sickle cell trait or disease?		
43. Have you had any problems with your eyes or vision?		
44. Have you had any eye injuries?		
45. Do you wear glasses or contact lenses?		
46. Do you wear protective eyewear, such as goggles or a face shield?		
47. Do you worry about your weight?		
48. Are you trying to or has anyone recommended that you gain or lose weight?		
49. Are you on a special diet or do you avoid certain types of foods?		
50. Have you ever had an eating disorder?		
51. Do you have any concerns that you would like to discuss with a doctor?		
FEMALES ONLY	Yes	No
52. Have you ever had a menstrual period?		
53. How old were you when you had your first menstrual period?		
54. How many periods have you had in the last 12 months?		
<b>Explain "YES" answers here</b>		

Last Name \_\_\_\_\_  
 First Name \_\_\_\_\_  
 Grade \_\_\_\_\_  
 Student # \_\_\_\_\_

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct.

Athlete Full Name \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**PRE-PARTICIPATION EXAMINATION/CLEARANCE FORM #2**

Athlete Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

**PHYSICIAN REMINDERS**

- Consider additional questions on more sensitive issues:
  - Do you feel stressed out or under a lot of pressure? \_\_\_\_\_
  - Do you ever feel sad, hopeless, depressed, or anxious? \_\_\_\_\_
  - Do you feel safe at your home or residence? \_\_\_\_\_
  - Have you ever tried cigarettes (including electronic), chewing tobacco, snuff, or dip? \_\_\_\_\_
  - During the past 30 days, did you use chewing tobacco, snuff, or dip? \_\_\_\_\_
  - Do you drink alcohol or use any other drugs? \_\_\_\_\_
  - Have you ever taken anabolic steroids or used any other performance supplement? \_\_\_\_\_
  - Have you ever taken any supplements to help you gain or lose weight or improve your performance? \_\_\_\_\_
  - Do you wear a seatbelt, use a helmet, and use condoms? \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_
- Consider reviewing questions on cardiovascular symptoms (questions 5–14).

EXAMINATION						
Height	Weight	<input type="checkbox"/> Male	<input type="checkbox"/> Female			
BP	/	(	/	)	Pulse	Vision R20/ L20/ Corrected <input type="checkbox"/> Y <input type="checkbox"/> N
MEDICAL				NORMAL	ABNORMAL FINDINGS	
Appearance • Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, arm span > height, hyperlaxity, myopia, MVP, aortic insufficiency)						
Eyes/ears/nose/throat • Pupils equal • Hearing						
Lymph nodes						
Heart a • Murmurs (auscultation standing, supine, +/-Valsalva) • Location of point of maximal impulse (PMI)						
Pulses • Simultaneous femoral and radial pulses						
Lungs						
Abdomen						
Genitourinary(males only)b						
Skin • HSV, lesions suggestive of MRSA, tinea corporis						
Neurologic c						
MUSCULOSKELETAL						
Neck						
Back						
Shoulder/arm						
Elbow/forearm						
Wrist/hand/fingers						
Hip/thigh						
Knee						
Leg/ankle						
Foot/toes						
Functional • Duck-walk, single leg hop						

- A Consider ECG, echocardiogram, and referral to cardiology for abnormal cardiac history or exam.  
 B Consider GU exam if in private setting. Having third party present is recommended.  
 C Consider cognitive evaluation or baseline neuropsychiatric testing if a history of significant concussion

- Cleared for all sports without restriction**
- Cleared for all sports without restriction with recommendations for further evaluation or treatment for** \_\_\_\_\_
- Not Cleared**
- Pending further evaluation
- For any sports
- For certain sports
- Reason \_\_\_\_\_
- Recommendations \_\_\_\_\_

I have examined the above-named student and completed the preparticipation physical evaluation. The athlete does not present apparent clinical contraindications to practice and participate in the sport(s) as outlined above. A copy of the physical exam is on record in my office and can be made available to the school at the request of the parent. If conditions arise after the athlete has been cleared for participation, the physician may rescind the clearance until the problem is resolved and the potential consequences are completely explained to the athlete (and parents/guardians).

Name of Physician (print/type) \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature of Physician \_\_\_\_\_ Date of Exam: \_\_\_\_/\_\_\_\_/\_\_\_\_

**STUDENT AND PARENT CONCUSSION AWARENESS FORM**

Bear Creek Middle School

**DANGERS OF CONCUSSION**

Concussions at all levels of sports have received a great deal of attention and a state law has been passed to address this issue. Adolescent athletes are particularly vulnerable to the effects of concussion. A concussion has the potential to result in death, or changes in brain function (either short-term or long-term). A concussion is a brain injury that results in a temporary disruption of normal brain function. A concussion occurs when the brain is violently rocked back and forth or twisted inside the skull as a result of a blow to the head or body. Continued participation in any sport following a concussion can lead to worsening concussion symptoms, as well as increased risk for further injury to the brain, and even death.

Information from the GHSA website.

**COMMON SIGNS AND SYMPTOMS OF CONCUSSION**

- ★ Headache, dizziness, poor balance, moves clumsily, reduced energy level/tiredness
- ★ Nausea or vomiting
- ★ Blurred vision, sensitivity to light and sounds
- ★ Fogginess of memory, difficulty concentrating, slowed thought processes, confused about surroundings or game assignments
- ★ Unexplained changes in behavior and personality
- ★ Loss of consciousness (NOTE: This does not occur in all concussion episodes.)

**BY-LAW 2.68: GHSA CONCUSSION POLICY:**

In accordance with Georgia law and national playing rules published by the National Federation of State High School Associations, any athlete who exhibits signs, symptoms, or behaviors consistent with a concussion shall be immediately removed from the practice or contest and shall not return to play until an appropriate health care professional has determined that no concussion has occurred. (NOTE: An appropriate health care professional may include a licensed physician (MD/DO) or another licensed individual under the supervision of a licensed physician, such as a nurse practitioner, physician assistant, or certified athletic trainer who has received training in concussion evaluation and management.

- a) No athlete is allowed to return to a game or a practice on the same day that a concussion (a) has been diagnosed, OR (b) cannot be ruled out.
- b) Any athlete diagnosed with a concussion shall be cleared medically by an appropriate health care professional prior to resuming participation in any future practice or contest. The formulation of a gradual return to play protocol shall be a part of the medical clearance.
- c) It is mandatory that every coach in each GHSA sport participate in a free, online course on concussion management prepared by the NFHS and available at [www.nfhslearn.com](http://www.nfhslearn.com) at least every two years – beginning with the 2015-2016 school year.
- d) Each school will be responsible for monitoring the participation of its coaches in the concussion management course, and shall keep a record of those who participate.

By signing this concussion form, I give Bear Creek Middle School permission to transfer this form to the other sports that my child may play. I am aware of the dangers of a concussion, and this form will represent myself and my child during the 2020-2021 school year. This form will be stored with the athletic physical form and other accompanying forms required by the Barrow County School System.

*I HAVE READ THIS FORM AND I UNDERSTAND THE FACTS PRESENTED.*

Athlete Full Name \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

## CARDIAC ARREST AWARENESS FORM

Bear Creek Middle School

### Learn the Early Warning Signs

If you or your child has had one or more of these signs, see your primary care physician:

- ★ Fainting suddenly and without warning, especially during exercise or in response to loud sounds like doorbells, alarm clocks or ringing phones
- ★ Unusual chest pain or shortness of breath during exercise
- ★ Family members who had sudden, unexplained and unexpected death before age 50 Family members who have been diagnosed with a condition that can cause sudden cardiac death, such as hypertrophic cardiomyopathy (HCM) or Long QT syndrome
- ★ A seizure suddenly and without warning, especially during exercise or in response to loud sounds like doorbells, alarm clocks or ringing phones

### Learn to Recognize Sudden Cardiac Arrest

If you see someone collapse, assume he has experienced sudden cardiac arrest and respond quickly. This victim will be unresponsive, gasping or not breathing normally, and may have some jerking (seizure-like activity). Send for help and start CPR. You cannot hurt him.

### Learn Hands-Only CPR

Effective CPR saves lives by circulating blood to the brain and other vital organs until rescue teams arrive. It is one of the most important life skills you can learn – and it's easier than ever.

- ★ Call 911 (or ask bystanders to call 911 and get an AED)
- ★ Push hard and fast in the center of the chest. Kneel at the victim's side, place your hands on the lower half of the breastbone, one on top of the other, elbows straight and locked. Push down 2 inches, then up 2 inches, at a rate of 100 times/minute, to the beat of the song "Stayin' Alive."
- ★ If an Automated External Defibrillator (AED) is available, open it and follow the voice prompts. It will lead you step-by-step through the process, and will never shock a victim that does not need a shock.

### SB 60: New Code Section 20-2-324.4:

This code requires the Department of Education to develop and post on its website materials to inform students participating in athletics, their parents and coaches about the symptoms and warning signs of sudden cardiac arrest. Further, each school must hold an informational meeting twice per year for students, parents, and coaches regarding such information. A student who passes out or faints while participating in an interscholastic athletic activity must be removed from participation. A student who exhibits any of the symptoms while participating may be removed from participation and the parents must be notified so they can decide what treatment, if any, the student should seek. Students removed from participation must be evaluated and cleared to return in writing by a healthcare provider. A coach is not eligible to coach an interscholastic athletic activity until he or she completes the requirements specified in law. Local boards, governing bodies of charter schools or non-public schools, officers, employees or volunteers of any such entities are free from liability for any act or failure to act related to the removal or non removal of a student.

By signing this sudden cardiac arrest form, I give Bear Creek Middle School permission to transfer this sudden cardiac arrest form to the other sports that my child may play. I am aware of the dangers of sudden cardiac arrest, and this signed sudden cardiac arrest form will represent myself and my child during the 2020-2021 school year. This form will be stored with the athletic physical form and other accompanying forms required by the Barrow County School System.

*I HAVE READ THIS FORM AND I UNDERSTAND THE FACTS PRESENTED.*

Athlete Full Name \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

CONSENT, INSURANCE, AUTHORIZATION, AND CODE OF CONDUCT

PARENTAL CONSENT FOR ATHLETIC PARTICIPATION

WARNING: Although participation in supervised interscholastic athletics and activities may be one of the least hazardous in which students will engage in or out of school, by its nature, participation in interscholastic athletics includes a risk or injury which may range in severity from minor to long term catastrophic, including permanent paralysis from the neck down or death. Although serious injuries are not common in supervised school athletic programs, it is possible only to minimize, not eliminate the risk. Participants can and have the responsibility to help reduce the chance of injury. Players must obey all safety rules, report all physical problems to their coaches, follow a proper conditioning program, and inspect their equipment daily. By signing this permission form, you acknowledge that you have read and understand this warning.

Parents or students who do not wish to accept the risks described in this warning should not sign this permission form.

I (we) hereby give consent for \_\_\_\_\_ residing at \_\_\_\_\_ to:

- (1) Compete in athletics at Bear Creek Middle;
(2) To accompany any school team of which the student is a member on any of its local or out-of-town trips;
(3) I hereby verify that the information on all forms is correct and understand that any false information may result in my son/daughter being declared ineligible.

AUTHORIZATION

I certify that the medical history provided is complete and accurate. I understand that this will serve as the basis for determining that my child, \_\_\_\_\_, may compete in athletics in Barrow County Schools. I also understand that this medical evaluation is only to determine fitness for athletics and is not to take the place of regular medical examinations. In case of an emergency or accident on the school grounds or during any school activity involving my child, \_\_\_\_\_, which in the opinion of school authorities present requires immediate medical or surgical attention, I hereby grant permission to physicians, consulting physicians, athletic trainers, emergency medical technicians, and other healthcare providers selected by school authorities to provide medical care and treatment (including hospitalization if deemed appropriate by school authorities or an appropriate healthcare provider) unless I am present and request otherwise or until I later request otherwise.

INSURANCE INFORMATION

Please INITIAL one of the following statements regarding insurance coverage for your son/daughter for the school year, then sign below.

\_\_\_\_\_ My son/daughter is adequately and currently covered by accident insurance that will cover injuries sustained while participating in interscholastic athletics (including, but not limited to, varsity and junior varsity football).

Company Providing Insurance: \_\_\_\_\_ Group: \_\_\_\_\_

Name of Insured: \_\_\_\_\_ Policy#: \_\_\_\_\_

\_\_\_\_\_ I wish to purchase the Benefit Plan provided by the Barrow County School System. (A signed copy of this Benefit Plan should be stapled to this form.)

ATHLETIC CODE OF CONDUCT

Barrow County Public Schools' athletic programs are a great source of pride to our communities. Involvement in athletics helps students develop a better sense of responsibility, cooperation; self-discipline, self-confidence, and sportsmanship that will help serve them long after graduation. The lessons and values learned by participating on athletic teams last a lifetime. All athletes are expected to abide by the highest standards of fair play and sportsmanship while on the court or field. We also have high expectations regarding behavior when the students are not engaged in athletic competitions. Students participating in Georgia High School Association extracurricular athletic activities act as representatives of Barrow County Public Schools. All students are expected to conduct themselves in such a manner as to meet the highest standards of the school system at all times.

I HAVE READ THIS FORM AND I UNDERSTAND THE FACTS PRESENTED.

Athlete Full Name \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

## SOCIAL MEDIA POLICY

Social media has become ingrained in today's society. The wide variety of social networking tools presently available provides students easy access to share important news and events with each other. Social media technologies such as Twitter, Facebook, Internet forums, weblogs, social blogs, micro blogging, Wikis, podcasts, photographs, video rating, social bookmarking and others have many benefits in our world; however, they can also be disruptive when inappropriate social media postings occur. Using these communication tools in an inappropriate manner can have negative consequences, especially if unkind words or threats are used with intent to hurt others.

The Bear Creek Athletic Department personnel recognizes and supports its student-athletes' and coaches' rights to freedom of speech, expression and association, including the use of social networks. In this context, each student-athlete must remember that participating and competing for the Bear Creek Middle School is a **privilege**, not a right. The student-athlete represents his or her school and the Barrow County School District, and therefore, they are expected to portray themselves, their teams, and their school in a positive manner at all times. Any online postings must be consistent with federal and state laws, as well as team, school, Barrow County School District rules and regulations (including those listed below).

Specifically prohibited behaviors include but are not limited to:

- Sexually explicit, profane, lewd, indecent, illegal, or defamatory language/actions.
- Derogatory language regarding school personnel or other students.
- Comments designed to harass or bully students or school personnel.
- Nude, sexually-oriented, or indecent photos, images or altered pictures.

Also prohibited are all on-campus connections to off-campus violations of the policy, including:

- Use of school computers to view off-campus postings.
- Students accessing posts at school on their own devices.
- Distribution of hard copies of posts on school property.
- Re-communication on campus of the content of the posts.

**Any authorized or unauthorized use in school or out of school of computer software, computer networks, telecommunications devices, information technology and related technologies, which disrupts or interferes with the educational process in any manner, is prohibited and may result in removal from the team or activity and an office referral.**

## SOCIAL MEDIA GUIDELINES

- 1. Avoid sharing private information.** Be careful of how much and what kind of identifying information you post on social networks. It's unwise to make available information such as date of birth, social security number, address, phone numbers, class schedules, bank account information or details about your daily routine. All of these can facilitate identity theft or stalking. Remember that once posted, the information becomes the property of the website.
- 2. Consider your career.** Be aware that potential current and future employers and college admissions offices can access information you post on social networking sites. Realize that any information you post provides an image of you to prospective employers or schools. The posting is considered public information. Protect yourself by maintaining a self-image you can be proud of years from now.
- 3. Watch out for 'phishing.'** Be careful in responding to unsolicited emails asking for passwords or PIN numbers, also known as "phishing." Reputable businesses do not ask for this information online.
- 4. Understand your rights.** Do not have a false sense of security about your rights to freedom of speech. Understand that freedom of speech is not unlimited and *not without consequence*. Social networking sites are not a place where you can say and do whatever you want without repercussions.
- 5. Protect your photos.** Remember that photos put on social networks become the property of the site. You may delete the photo from your profile, but it still stays on their server. Internet search engines like Google or Yahoo may still find that image long after you have deleted it from your profile. Think long and hard about what type of photo you want to represent you. One of the biggest lessons athletes should learn is that anything you post online enters the public record. Students should carefully consider their profiles and ask themselves how they would look to a future college admissions officer or potential employer.

*Source: Williams, J. (2017). Creating a social media policy for athletes. Coach & AD.*

*I HAVE READ THIS FORM AND I UNDERSTAND THE FACTS PRESENTED.*

Athlete Full Name \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_



BCMS STUDENT ATHLETE EMERGENCY FORM

**Emergency Contacts**

Guardian #1

Guardian #2

Family or Friend

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

( ) \_\_\_\_\_  
BEST phone number

( ) \_\_\_\_\_  
BEST phone number

( ) \_\_\_\_\_  
BEST phone number

The coach will contact all numbers starting with Guardian #1.

In the event of a serious or potentially serious medical emergency and no one can be contacted medically trained staff will perform whatever supportive measures they deem necessary until such time as either: Guardian can be contacted, professional medical personnel can attend, or transportation to regular medical facility can be arranged.

**Emergency Information**

Family Physician

Insurance Company

Known allergies to medications or other conditions

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

( ) \_\_\_\_\_  
BEST phone number

( ) \_\_\_\_\_  
BEST phone number

*I HAVE READ THIS FORM AND I UNDERSTAND THE FACTS PRESENTED.*

Athlete Full Name \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_