



STUDENT ACTIVITIES HANDBOOK

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BROOKINGS BOBCATS

SOUTH DAKOTA HIGH SCHOOL ACTIVITIES ASSOCIATION

YOU ARE NOT ELIGIBLE IF:

1. You have reached your 20th birthday.
2. You have attended more than 4 first semesters and 4 second semesters of school in grades 9 through 12. Once a student enrolls in ninth grade, all eight semesters must be consecutive unless withdrawal from school is necessary due to illness or injury.
3. You did not pass 20 hours of high school work (equivalent of 4 full time subjects) per week for the preceding semester.
4. You are not enrolled in and attending a minimum of 20 hours of high school work per week during the current semester.
5. You have graduated from a regular four-year high school or institution of equivalent rank.
6. You have not enrolled by the 16th school day of the current semester
7. You have been absent from school for more than 10 consecutive school days (illness of the student or a death in the immediate family excepted).
8. You have transferred from one high school to another without a corresponding change in residence of your parents (exception pursuant to “open enrollment”).
9. You do not have a copy of your transcript on file in the principal’s office prior to competition.
10. You do not have on file in the principal’s office a signed SDHSAA physical examination and parent’s permit form for interscholastic athletics.
11. You have ever participated in an athletic contest under an assumed name.
12. You have never participated in athletics in any institution of learning of higher rank than a standard secondary school.
13. You have violated your amateur standing.
14. During a high school sport season, you compete on an unattached basis as an individual or as a member of a non school team in the same sport.

CONSULT YOUR COACH OR PRINCIPAL FOR ADDITIONAL INFORMATION

CORE VALUES – ACTIVITIES DEPARTMENT

Citizenship
Achievement
Teamwork
Service

OBJECTIVES

The program of student activities will assist each participant in:

- Learning the wise use of leisure time
- The constructive use of their unique talents and skills
- Developing new recreational and vocational interests and skills.
- Developing positive habits that will contribute to a healthy lifestyle.
- Developing leadership and collaborative skills.
- Developing a work ethic.
- Developing a more positive attitude and increased motivation for education.
- Increasing their understanding and participation in the democratic process.
- Improving their communication skills.
- Developing a repertoire of skills – problem solving, decision making, goal setting, time management, etc. – which are marketable.
- Achieving successes that result in increased self esteem.

STUDENT ACTIVITY CODE OF CONDUCT

General Statement of Philosophy

The Brookings School District (BSD) encourages students to participate in activities due to the benefits of such participation. The BSD also recognizes the need to establish a code of conduct for activity participants that reinforces behaviors that reflect positively on the individual, school, and community.

1. Student participation in student activities is a privilege, rather than a right, and
2. Students who voluntarily exercise the privilege of participating in student activities shall, consequently, be expected to exemplify high standards of behavior, and
3. The program of student activities should address the need for good order and a concern for student health and safety.

Definitions

1. "Extracurricular activity" shall apply to all performing or competitive activities as follows: all interscholastic sports sponsored by or club sports recognized by the BSD as well as Drama, Student Council, Band, Bobcat, Choir, Debate, Oral Interp, Orchestra, Cheerleading, Dance Team, Improvisational Theater, FFA, FCCLA and any other performing or competitive sports or activities that are either sponsored or recognized by the BSD in the future.
2. "Activity advisor" shall apply to any employee of the BSD who is assigned the responsibility for coaching, directing, or advising an activity.
3. "Public appearance" shall include, but not be restricted to, recognized schedule of performance, competitive events, and trips.
4. "Year-round" shall mean, 24-hours a day, 365 days a year.
 - A. Conduct violations for seventh and eighth grade students shall commence on the first day of each school year.
 - B. Conduct violations for high school students shall commence on the first day of the freshman year or the first day of an activity if a freshman becomes a member of an activity that starts before the first day of the freshman year of school
5. "Suspension" begins with the date of adjudication (as determined) by school officials. Students participating in extracurricular activities will be adjudicated and begin a suspension when a conduct violation becomes evident. Students not involved in an extracurricular activity when a conduct violation becomes evident, will be adjudicated when they become a member of an extracurricular activity.
6. "Crime" shall mean a violation of any city, state, or federal law, excluding Class II misdemeanors and all motor vehicle offenses not classified as felonies.

7. "Evidence" of a violation may be the result of:
 - A. Information received from law enforcement or court services personnel which provides reasonable cause to believe that an infraction has occurred;
 - B. A student found guilty, pled guilty, or enters a no contest plea in either juvenile court or adult criminal court;
 - C. A self-reported violation by either the parent or student; or
 - D. An observed, violation reported by a staff member.

General Policy Statements

1. The Code of Conduct is in force, year-round, for all students in grades 7-12, participating in extracurricular activities under the auspices of the BSD.
2. The possession, use, distribution, ingesting, inhaling or otherwise taking into the body of tobacco, alcohol, anabolic steroids, controlled drugs or substances or marijuana is a violation of the Code of Conduct.
3. The BSD will utilize and comply with all South Dakota Codified Laws in the implementation of this policy.
4. All other crimes as defined in this policy are a violation of the Code of Conduct.
5. Student leaving eighth (8th) grade will have their previous violations expunged.
6. Conduct violations are cumulative from grades nine (9) through (12). All violations will, however, be expunged after eighteen (18) months without further violations.
7. A student must successfully complete an activity season in order to satisfy a suspension.
8. The principal, or the principal's designee, shall be responsible for the fair and equitable administration of the Code of Conduct.
9. Students in violation of the Code of Conduct are subject to the following consequences.

Consequences

1. SDCL 13-32-9 Violation

- A. First Violation – any person adjudicated, convicted, the subject of an informal adjustment or court-approved juvenile diversion program, or the subject of a suspended imposition of sentence for possession, use or distribution of controlled drugs or substances or marijuana as defined in chapter 22-42, or for ingesting, inhaling or otherwise taking into the body any substances or prohibited by 22-42-15, is ineligible to participate in any extracurricular activity at any secondary school accredited by the Department of Education for one calendar year from the date of adjudication, conviction, diversion, or suspended imposition of sentence. The one-year suspension may be reduced to sixty school days if the person participates in an assessment with a certified chemical dependency counselor or completes an accredited intensive prevention or treatment program. If the assessment indicates the need for a higher level of care, the student is required to complete the prescribed program before becoming eligible to participate in extracurricular activities.
- B. Subsequent Violation – that person is ineligible to participate in any extracurricular activity at any secondary school accredited by the Department of Education.

2. Non-SDCL 13-32-9 Violations and Crimes

- A. First Violation – suspension from participation in all public appearances in all extracurricular activities until four (4) points are served
- B. Second Violation – suspension from participation in all public appearances in all extracurricular activities until twelve (12) points are served.
- C. Subsequent Violations – suspension from participation in all public appearances in all extracurricular activities until thirty-six (36) points are served.
- D. Suspension Reduction (Second and Subsequent Violations) – consequences may be reduced by fifty percent (50%) if the student agrees to enroll in, and successfully completes, a rehabilitation program, approved by school officials. If the student fails to successfully complete the program requirements, the consequences will be reinstated.

<u>Category</u>	<u>Extracurricular Activity</u>	<u>Points</u>
I.	Bobcat, Drama, Student Council, FFA, FCLA	5
II.	Choir, Orchestra, Performance Cheer & Dance	4
III.	Football, Cross Country, Competitive Cheer & Dance, Oral Interp, and Improv	3
IV.	Golf, Tennis, Wrestling, Gymnastics, Track & Field, Debate	2
V.	Volleyball, Basketball, Band	1
VI.	Sideline Cheer	(See specific report)
VII.	Recognized Club Sports and Activities	(Determined by School Officials)

Evaluation and Treatment (First Violation – Alcohol)

A student in violation of the possession, use or distribution of alcoholic beverages will be referred to the East Central Mental Health and Chemical Dependency Center of Brookings, or other similar agency as approved by school officials. The total cost of such referral will be borne by the student. Arrangements shall be made for information, gathered during the evaluation process, to be forwarded to the building principal along with agency recommendations for further treatment. Compliance with treatment recommendations is mandatory. Students who fail to complete the scheduled evaluation or treatment will not be allowed to participate in any public appearances of any student activity.

Grievance Procedure

A student penalized for violating the Code of Conduct may file form “JII-E” with the building principal, indicating the following. That:

1. A rule is unfair;
2. A rule in practice discriminates against or between students based on gender, age, race, color, religion, national origin, or handicap;
3. School personnel used an unfair procedure in assessing a form of punishment against a student.

ATHLETIC AWARDS

Basketball, competitive spirit, cross country, football, golf, gymnastics, tennis, track & field, volleyball, and wrestling are the interscholastic sports which are sponsored by Brookings High School. Basketball, football, track and field, volleyball, and wrestling are sponsored at the Mickelson Middle School. Baseball, bowling, Fastpitch, soccer, and swimming are recognized as club sports at Brookings High School.

Athletes must complete a season in “good standing” in order to either be eligible for any award or to earn credit for special awards. If either hardship case or extenuating circumstances exist, that may warrant special consideration of whether or not an athlete should or should not receive an award, the head coach and/or staff will make a recommendation to the activities director for a final decision.

Brookings High School holds an Annual Athletics Awards banquet that recognizes special achievements in and contributions to Bobcat Varsity Interscholastic Athletics and Club Sports.

BROOKINGS HIGH SCHOOL

Major Award – Varsity Letter

Each athlete will receive a varsity letter when they, first, meet the athletic department competition requirements through varsity competition in any sport. Boys are awarded a black letter, and girls earn a red letter. As an incentive to attend the seasonal, athletic awards ceremonies, previous letter winners (in attendance) will be awarded a Bobcat medallion when they earn subsequent major awards. The Bobcat medallion, however, is not an earned award of the BHS athletic department that can be received without the student-athlete's attendance at award's night.

1. **Basketball and Football:** Must play in one half of the total quarters of the regular season scheduled.
2. **Golf, Gymnastics, Tennis and Wrestling:** Must compete in one half of the regular season schedule or qualify by placing in either an ESD, Regional or State Tournament.
3. **Cross Country:** Must compete in one half of the regular season schedule and qualify by either placing at an invitational meet, the ESD meet or the State meet.
4. **Track and Field:** Must compete in one half of the regular season schedule and qualify by either earning a total of twelve (12) points during the season, qualifying for the State meet in accordance with SDHSAA standards or placing in either the ESD meet or the Howard Wood Dakota Relays.
5. **Volleyball:** Must play in one half of the total games of the regular season schedule.
6. **Managers:** Must complete two seasons in the same sport.
7. **Team:** When a team wins either ESD or State Championship, the entire varsity squad may earn letters with the coach's recommendation.
8. **Seniors:** Who have completed both their junior and senior seasons in the same sport, but who have not attained the competition requirements, will qualify for a varsity letter when recommended by the coaching staff.
9. **Cheerleaders:** As recommended by the cheerleading advisor.
10. **Recognized Club Sports:** Criteria as approved by the Activities Administrator.

Minor Awards

1. **Freshman:** Each athlete who completes a season in “good standing” will be awarded a certificate with his/her participation record for that school year.
2. **Sophomore:** Each athlete who completes a season in “good standing” will be awarded a set of numerals for his/her year of graduation (boys–black; girls–red). Three-sport participants will earn a set of white numerals.
3. **Juniors:** An athlete who does not meet the competition requirements for a major award, but whom is a member in “good standing” in any sport, will be awarded a 4” junior letter (one per year).
4. **Scholars Athlete:** Each varsity athlete, who earns a grade point average of 3.5 during the quarter of participation, will be recognized with a Varsity Scholar Athlete Certificate.
5. **Varsity:** At the conclusion of each athletic season, teams select a Most Valuable, Most Inspirational, and Most Improved athlete. These student-athletes are recognized with an individual plaque at the annual awards banquet as well as on a school plaque in the athletic department trophy case.
6. **Outstanding Senior Athlete:** As an incentive for multi-sport participation, this special award can be earned by any senior athlete, who participates in an interscholastic sport during each session in their junior year and letters during three seasons in their senior year.

White Letter – Coaches’ Award

The white letter award was initiated by the Bobcat Head Coaches, as a special incentive to participate in multiple, interscholastic sports. It acknowledges outstanding interscholastic athletic as well as club sport and activity participation. Recipients must earn 30 points – during three consecutive years – and must continue to participate in the sports in which they have earned a major award (or in another sport during those seasons). Note: each recipient must earn a minimum of three varsity letters (15 points) in interscholastic sports in order to qualify for the white letter. This special coaches’ award remains the property of the athletic department until graduation, and may be revoked either due to a lapse in participation or student misconduct. The white letter is awarded at the Annual Athletic Awards banquet and pictures of white letter recipients are displayed above the athletic department trophy cases. White letter recipients who continue to participate, in all sports – in which points have been earned during their senior year, will be awarded a white letter plaque at the annual awards banquet.

MICKELSON MIDDLE SCHOOL

Certificates

Each athlete who completes a season in “good standing” will receive a certificate with the participation record for that school.

Chevrons

Athletes who participate in a sport during each season of both their seventh and eighth grade years will be awarded the red chevron.

Bobcat Award

Athletes that earn a total of 25 points as a result of athletic as well as non-athletic participation will be awarded the Bobcat patch. In order to qualify for a Bobcat, the athlete must earn 50% (6) of the competition points (12).

PARENT/COACH COMMUNICATION

Parenting and coaching are both extremely difficult vocations. Mutual understanding and respect contributes to the acceptance of the actions of both parties for the greater benefit of the student. As parents, you need to understand the expectations of specific programs. **You can expect your child's coach to communicate:**

1. Philosophy
2. Expectations of your child as a squad member.
3. The potential for injury and risk management procedures.
4. Student conduct responsibilities and consequences.

As your child becomes involved in student activities, he/she will experience some very rewarding moments and have the opportunity to learn many of life's lessons. There may be times when your child and/or you may be disappointed. Please encourage your child to communicate questions and concerns to the coach(s). The coach has knowledge of and experience in the activity, but you know your child. At times a positive dialogue between parents and coaches may be beneficial. **Coaches should expect parents to communicate:**

1. Concerns directly to them.
2. Advance notification of conflicting schedules
3. Specific questions, regarding philosophy or expectations.
4. About the emotional and physical treatment of their child.
5. Questions about the child's performance as well as strategies for improvement.
6. Concerns about the child's behavior or attitude.

Coaches are professionals who are involved in highly competitive, interscholastic sports. They are expected to make team decisions, based upon what they believe is best for all participants. Certain issues must be left to the discretion of the coach. **Topics that are not appropriate to discuss with the coach include:**

1. The playing time of team members.
2. Team strategy.
3. Play calling.
4. Other student-athletes.

Hopefully, your child will feel free to communicate with his/her coach. Interaction between the parent and coach is also encouraged. **If a parent desires a conference with a coach, the following procedure should be used.**

1. Whenever possible, call the coach at school in order to arrange an appointment (each coach has a school voice mail for messages when they are unavailable).
2. Please do not confront a coach either before or after a contest or practice. These times can be emotional for both parents and coaches. Meetings of this nature do not promote the resolution of issues.

On occasion, a parent/coach meeting does not provide satisfactory resolution. If that is the case, the parent is encouraged to schedule an appointment with the Activities Administrator at 696-4112. If a concern about a coach is expressed, the Activities Administrator will facilitate communication between the parent and coach for the purpose of conflict resolution.

FUNDAMENTALS OF SPORTSMANSHIP

Reprinted from the SDHSAA Newsletter

One of the missions of co-curricular school activities is to serve as an extension of the classroom. There are strong lessons to be learned in athletics, speech and music. One of those lessons is to set and maintain high standards of sportsmanship, ethics and integrity in our schools and our society. It is up to each of us to provide the direction under which good sportsmanship can prosper and have a positive impact on our society.

As we begin the school year, please take a few minutes to emphasize to your students, coaches, and fans what is expected of them at an athletic event as a competitor or spectator. After all, such events are an extension of the school day, and we should expect the same type of respectful behavior exhibited in the athletic arena as we do in the classroom. We urge you to ask your community to demonstrate self-control and self-discipline and at the same time, enjoy the games.

Everyone should keep the following fundamentals in mind while attending a high school event.

- ▶ **Gain an Understanding and Appreciation for the Rules of the Contest.** The necessity to be well informed is essential. Know the rules. If you are uninformed, refrain from expressing opinions on the officials, coaches, players or administrative decisions.
- ▶ **Exercise Representative Behavior at All Times.** Good sportsmanship requires one to understand personal prejudices that may become a factor in his/her behavior. The true value of interscholastic competition relies on everyone exhibiting behavior which is representative of a sound value system.
- ▶ **Recognize and Appreciate Skilled Performance Regardless of Affiliation.** Applause for an opponent's good performance displays generosity and is a courtesy that should be regularly practiced. This not only represents good sportsmanship, but also reflects a true awareness of the game by recognizing and acknowledging quality.
- ▶ **Exhibit Respect for the Officials.** The officials of any contest are impartial arbitrators who are trained and who perform to the best of their ability. Mistakes by those involved in the contest are part of the game. We should not rationalize our own poor or unsuccessful performance or behavior by placing responsibility on the officials.
- ▶ **Display Openly a Respect for Opponents.** Opponents are guests and should be treated cordially, and with thoughtfulness. They should be treated the same as a guest in your own home.
- ▶ **Display Pride in Your Actions at Every Opportunity.** Never allow your ego to interfere with good judgment. Regardless of whether you are a student, player, coach or official, this value is paramount since it suggests that you care about yourself and how others perceive you.
- ▶ **Always Practice the Golden Rule.** Always treat others the way you would expect them to treat you.

Remember: Sportsmanship Begins With You!

BROOKINGS PUBLIC SCHOOL DISTRICT 5-1

2011-12 Activity Participant Packet

ATTENTION: PARENTS/LEGAL GUARDIANS AND ACTIVITY PARTICIPANTS

WARNING AND SAFETY STATEMENT

Although participation in supervised interscholastic athletics and activities may be one of the least hazardous any student will engage in; by its nature, participation in interscholastic activities includes a risk of injury which may range in severity from minor to catastrophic injuries, including permanent paralysis or death. Serious injuries are not common in supervised school activity programs; however, it is possible only to minimize, not eliminate this risk.

MEDICAL INSURANCE

All students participating in interscholastic activities are required to have medical insurance. **(Please check the appropriate line below).**

- ☐ We do have family medical insurance (***or Medicaid***).
- ☐ We do **not** have family medical insurance & wish to purchase the basic family medical policy.

Schools have insurance applications for school-time and full-time coverages.

YEAR-ROUND ACTIVITY RULES

We have read the Brookings School District year-round Activity Rules (Board Policy JJC) and agree to abide by its rules and regulations.

SDHSAA IN-SEASON RULE

A student who is a member of a high school team may not participate in **games, practice, tryouts** in that particular sport during the same season on an independent or non-high school team or as a member of an "All Star" team. Violation of this rule causes the student to become ineligible for the high school team for the remainder of that sport season.

By signing below, we acknowledge that we agree to all of the above statements and rules, as well as the Consent for Release of Medical Information (HIPAA), and Consent for Medical Treatment.

Student Name _____ Grade (Fall 2011) _____

Students DOB _____ Address _____ Zip _____

Parent/Legal Guardian Name _____ Phone # _____

SIGNED _____ **SCHOOL** _____
(Student)

SIGNED _____ **DATE** _____
(Parent/Legal Guardian)



Please complete ALL pages of this packet and sign where indicated.
BROOKINGS HIGH SCHOOL Home of the Bobcats

530 Elm Avenue
Brookings, SD 57006-3498

Tele: 605-696-4111
Fax: 605-696-4128

Dear Parent/Guardians:

The Brookings School District **does not** provide any type of health or accident insurance for injuries incurred by your child at school.

Since children are particularly susceptible to injuries, we encourage you to review your present health and accident insurance program prior to your child's participation in any sports or school sponsored activity to determine if your coverage is adequate. If you do not feel your insurance is adequate because of a deductible or coinsurance clause, or if you do not have insurance, we encourage you to review the student insurance program. This plan will provide benefits for medical expenses incurred because of an accident. An explanation of the cost and benefits is explained on the premium envelope.

				Annual	With Major Expense <u>Premium</u>
<u>Benefit</u>					
➤ A.	Full-Time	(24 hour) – with NO Sports	K-12	\$99	\$190
	Full-Time	with All Sports Coverage	7-12	\$164	\$255
		(except football, grades 9-12)			
➤ B.	School time – NO sports		K-12	\$16	
	School time – All Sports		7-12	\$81	
		(except football, grades 9-12)			
➤ C.	Extended Dental Coverage		K-12	\$9	
➤ D.	Football Coverage		9-12	\$225	
	(Major Expense Benefit does NOT apply)				
	(Grades 7/8 football covered by the All Sports Coverage)				

If you are interested in obtaining this insurance coverage, please pick up a form from your student's coach or school. Be sure to fill out the form as directed, include check and return to the school.

If you feel your coverage is adequate, please sign the bottom of this letter and return to your coach, athletic director, or school office.

Randy S. Soma
Director of Student Activities

CONSENT FOR MEDICAL TREATMENT

I am the mother / father / legal guardian of (student named below) who participates in co-curricular activities in the Brookings School District. I hereby consent to any medical services & hospital care that may be required while said student is under the supervision of an employee of Brookings School District while involved in a school-sponsored/approved activity. I hereby appoint said employee to act on my behalf in securing necessary medical services & hospital care from any duly licensed physician or osteopath.

CONSENT OF STUDENT

I have read the above consent form signed by my mother / father / legal guardian, & join with him/her in consent.

HEALTH HISTORY

Student's Name: _____

Address: _____

Phone Number: _____

Student's Religion (optional): _____

Parent/Legal Guardian: _____

Address: _____ Phone: _____

Insurance Company: _____ Insured Person: _____

Policy Number: _____

Father/Step-Father Work Phone: _____

Mother/Step-Mother Work Phone: _____

If we are unable to reach you in an emergency, whom should we contact?

Emergency Name: _____

Relationship: _____ Phone: _____

Emergency Name: _____

Relationship: _____ Phone: _____

Hospital Preference: _____

MEDICAL INFORMATION

Family Doctor: _____ Date of Last Tetanus Shot: _____

Any Allergies: _____

Any Major Medical Problems (i.e. Heart, blood pressure, diabetes):

Allergic to any Medications: _____

Medication Taken on a Daily Basis: _____

Legal Representative's Signature: _____

Circle one: **Parent** **Legal Guardian** **Other** _____

Authorization for Release of Medical Information (HIPAA)

(Health Insurance Portability and Accountability Act)

Student Name _____

Date of Birth _____

Grade _____ (Fall, 2011) Gender F ☐ M ☐

1. I authorize the use or disclosure of the above named individual's health information including the Pre-Participation History and Physical Evaluation information pertaining to a student's ability to participate in school-sponsored/approved activities. Such disclosure may be made by a Health Care Provider generating or maintaining such information
2. The information identified above may be used by or disclosed to the school nurse, athletic trainer, coaches, medical providers and other school personnel involved in the care of this student.
3. This information for which I am authorizing disclosure will be used for the purpose of determining the student's eligibility to participate in co-curricular activities, any limitations on such participation and any treatment needs of the student.
4. I understand that I have a right to revoke this authorization at any time by sending a written notice of revocation to the building Principal. I understand that the revocation will not apply to information that has already been released in reliance upon this authorization.
5. This authorization will expire on: **6/30/2012**.
6. I understand that once the above information is disclosed, the recipient may re-disclose it and federal privacy laws or regulations may not protect it and the information.
7. I understand authorizing the use or disclosure of the information identified above is voluntary. However, a student's eligibility to participate in co-curricular activities depends on such authorization. I need not sign this form to ensure healthcare treatment.
8. Notice: Organizations or persons who receive education records as defined by the Federal Educational Rights and Privacy Act (FERPA) may not provide access to such records to any other party without the written consent of the parent/guardian of the student.

Date

Legal Representative's Signature: _____

Circle one: Parent Legal Guardian Other _____

CONCUSSION FACT SHEET FOR ATHLETES

What is a concussion?

A concussion is a brain injury that:

- Is caused by a bump, blow, or jolt to the head or body
- Can change the way your brain normally works
- Can occur during practices or games in any sport or recreational activity
- Can happen even if you haven't been knocked out
- Can be serious even if you've just been "dinged" or "had your bell rung"

All concussions are serious. A concussion can affect your ability to do schoolwork and other activities (such as playing video games, working on a computer, studying, driving, or exercising). Most people with a concussion get better, but it is important to give your brain time to heal.

What are the symptoms of a concussion?

You can't see a concussion, but you might notice one or more of the symptoms listed below or that you "don't feel right" soon after, a few days after, or even weeks after the injury.

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light or noise
- Feeling sluggish, hazy, foggy, or groggy
- Difficulty paying attention
- Memory problems
- Confusion

What should I do if I think I have a concussion?

- **Tell your coaches and your parents.** Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach right away if you think you have a concussion or if one of your teammates might have a concussion.
- **Get a medical check-up.** A doctor or other health care professional can tell if you have a concussion and when it is OK to return to play.
- **Give yourself time to get better.** If you have a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have another concussion. Repeat concussions can increase the time it takes for you to recover and may cause more damage to your brain. It is important to rest and not return to play until you get the OK from your health care professional that you are symptom-free.

How can I prevent a concussion?

Every sport is different, but there are steps you can take to protect yourself.

- Use the proper sports equipment, including personal protective equipment. In order for equipment to protect you, it must be:
 - The right equipment for the game, position, or activity
 - Worn correctly and the correct size and fit
 - Used every time you play or practice
- Follow your coach's rules for safety and the rules of the sport
- Practice good sportsmanship at all times
-

It's better to miss one game than the whole season.

Student's Signature: _____

Date: _____

Parent's/Guardians Signature: _____

Date: _____

THIS FORM MUST BE SIGNED ANNUALLY AND MUST BE AVAILABLE FOR INSPECTION AT THE SCHOOL

CONCUSSION FACT SHEET FOR PARENTS

What is a concussion?

A concussion is a brain injury. Concussions are caused by a bump, blow, or jolt to the head or body. Even or what seems to be a mild bump or blow to the head can be serious.

What are the signs and symptoms?

You can't see a concussion, Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days after the injury. If your teen reports, one or more symptoms of concussion listed below, or if you notice the symptoms yourself, keep your teen out of play and seek medical attention right away.

Signs Observed By Parents or Guardians	Symptoms Reported by Athlete
<ul style="list-style-type: none">• Appears dazed or stunned• Is confused about assignment or position• Forgets an instruction• Is unsure of game, score, or opponent• Moves clumsily• Answers questions slowly• Loses consciousness (even briefly)• Shows mood, behavior, or personality changes• Can't recall events prior to hit or fall• Can't recall events after hit or fall	<ul style="list-style-type: none">• Headache or "pressure" in head• Nausea or vomiting• Balance problems or dizziness• Double or blurry vision• Sensitivity to light or noise• Feeling sluggish, hazy, foggy, or groggy• Concentration or memory problems• Confusion• Just not "feeling right" or is "feeling down"

How can you help your teen prevent a concussion?

Every sport is different, but there are steps your teens can take to protect themselves from concussion and other injuries.

- Make sure they wear the right protective equipment for their activity. It should fit properly, be well maintained, and be worn consistently and correctly.
- Ensure that they follow their coaches' rules for safety and the rules of the sport
- Encourage them to practice good sportsmanship at all times.

What should you do if you think your teen has a concussion?

1. **Keep your teen out of play.** If your teen has a concussion, her/his brain needs time to heal. Don't let your teen return to play the day of the injury and until a health care professional, experienced in evaluating for concussion, says your teen is symptom-free and it's OK to return to play. A repeat concussion that occurs before the brain recovers from the first – usually within a short period of time (hours, days, or weeks) – can slow recovery or increase the likelihood of having long-term problems. In rare cases, repeat concussions can result in edema (brain swelling), permanent brain damage, and even death.
2. **Seek medical attention right away.** A health care professional experienced in evaluating for concussion will be able to decide how serious the concussion is and when it is safe for your teen to return to sports.
3. **Teach your teen that it's not smart to play with a concussion.** Rest is key after a concussion. Sometimes athletes wrongly believe that it shows strength and courage to play injured. Discourage others from pressuring injured athletes to play. Don't let your teen convince you that s/he's "just fine".
4. **Tell all of your teen's coaches and the student's school nurse about ANY concussion.** Coaches, school nurses, and other school staff should know if your teen has ever had a concussion. Your teen may need to limit activities while s/he is recovering from a concussion. Things such as studying, driving, working on a computer, playing video games, or exercising may cause concussion symptoms to reappear or get worse. Talk to your health care professional, as well as your teen's coaches, school nurse, and teachers. If needed, they can help adjust your teen's school activities during her/his recovery.

Parent's/Guardian's Signature _____ Date _____

THIS FORM MUST BE SIGNED ANNUALLY AND MUST BE AVAILABLE FOR INSPECTION AT THE SCHOOL

RETURN TO COMPETITION, PRACTICE, OR TRAINING

This form is to be used after a youth athlete is removed from, and not returned to, competition, practice, or training after exhibiting concussion symptoms. The youth athlete should not be returned to competition, practice, or training until written authorization is obtained from an appropriate health care professional and the parent/guardians. A licensed health care provider is a person who is (1) Registered, certified, licensed, or otherwise recognized in law by the State of South Dakota to provide medical treatment; and (2) Trained and experienced in the evaluation, management, and care of concussions. This form should be kept on file at the school and need not be forwarded to the SDHSAA Office.

Athlete: _____ School: _____ Grade: _____

Sport: _____ Date of Injury: _____

REASON FOR ATHLETE'S INCAPACITY

Guidelines for returning to competition, practice, or training after a concussion

Note: Each step should be completed with no concussion symptoms before proceeding to the next step.

1. No activity, complete rest with no symptoms.
2. Light exercises: walking or stationary cycling with no symptoms.
3. Sport specific activity without body contact and no symptoms.
4. Practice without body contact and no symptoms. Resume resistance training.
5. Practice with body contact and no symptoms.
6. Return to game play with no symptoms.

Note:

1. If symptoms return at any time during the rehabilitation process, wait until asymptomatic for 1 full day, then re-start at the previous step.
2. Never return to competition with symptoms.
3. Do not use "smelling salts".
4. **When in doubt, sit them out.**

HEALTH CARE PROFESSIONAL'S ACTION

I have examined the named student-athlete following this episode and determined the following:

_____ **Permission is granted** for the athlete to return to competition, practice, or training

_____ **Permission is not granted** for the athlete to return to competition, practice, or training

COMMENT: _____

Health Care Professional _____ Date: _____

Parent/Guardian _____ Date: _____

School Administrator _____ Date: _____



BROOKINGS HIGH SCHOOL

Home of the Bobcats

530 Elm Avenue
Brookings, SD 57006-3498

Tele: 605-696-4111
Fax: 605-696-4128

PARENTAL TRANSPORTATION AUTHORIZATION

Some of the activity programs offered by Brookings High School may require participants to arrange transportation to another facility for either local practice or contests. Whereas it is impossible for the district to provide supervision during the transportation period, parents/guardians must select a transportation preference.

My student is a voluntary participant in the activity(ies) of _____
I understand that transportation is needed to reach local practice and/or contest sites. I grant permission for my student to (please check):

- _____ drive to the site
- _____ ride with other students
- _____ neither of the above, but I will assume the responsibility
for the transportation arrangements as a condition of participation.

Furthermore, I acknowledge that my selection releases the Brookings School District from any liability for my student's safety and welfare, associated with such transportation.

(Parent/Guardian Signature)

(Date)

(Student - **Please Print**)

(Date)

EASTERN SOUTH DAKOTA CONFERENCE



BROOKINGS HIGH SCHOOL **Home of the Bobcats**
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STUDENT TRAVEL – Board of Education Policy JJA

Ideally, students will travel to and from school-sanctioned events in school-approved transportation. In extenuating circumstances – related to scheduling conflicts – the parent/guardian may complete a transportation waiver and submit it to the activity advisor (e.g. coach or director) for prior consideration. In such cases, the activity advisor may grant permission for the parent/guardian or (in their absence) an adult member of the immediate family (i.e. grandparent, uncle/aunt or sibling) to provide alternative transportation. When extenuating circumstances exist – and neither a parent/guardian nor an adult member of the immediate family can provide transportation – the Director of Student Activities or Principal may (upon receiving this transportation waiver) grant permission for the parent/guardian to designate a “responsible adult” to transport the student on their behalf. In no instance, however, will students either provide their own transportation or travel with anyone other than the individuals listed above to or from out of town events.

Please complete and submit this transportation waiver to your child’s advisor, coach or director or (in their absence) to the Activities Department for prior consideration of alternative transportation to or from a school-sanctioned event.

TRANSPORTATION WAIVER

My child, _____ will be participating with the
(Print Name)

_____ at _____ on _____.
(Student Group) (Location)
(Date)

I request permission for _____ to transport my child **to – from** (circle
(name and relationship)
one or both) this event. My request releases the Brookings School District from all responsibility and liability for my child’s safety and welfare – associated with student travel – and this event.

Furthermore, I understand that violations of this policy may result in loss of the privilege of participating in this event as well as the possibility of further disciplinary action.

Having read Board of Education Policy JJA and this transportation waiver, I acknowledge that I understand both documents, and accept full responsibility for my child’s transportation.

(Parent/Guardian Signature)

(Date)

(Student Signature – **Please Print**)

(Date)

ACTIVITY ADVISOR MUST RETAIN THIS FORM

Randy Soma
Activities Administrator
Randy.Soma@k12.sd.us

ACKNOWLEDGEMENT OF PARTICIPANT RESPONSIBILITY

Name _____ Graduation Year _____
(Please Print)

Participation in student activities involves a commitment to the group and school to perform to my capabilities. As a voluntary participant in an activity at Brookings High School, I agree to:

1. Comply with SDHSAA eligibility requirements.
2. Comply with the Student Conduct – Student Activities Policy.
3. Submit all activity department forms as required
4. Care for activity department equipment and uniforms during the participation period, and either return them at the conclusion of my participation or reimburse the Brookings School District at current, replacement costs.
5. Conduct myself as a role model in school activities and in public so I will bring credit to Brookings High School and my activity group.
6. Abide by Brookings High School attendance requirements.
7. Be present at all meetings, practices and events unless excused prior to the absence. I understand that family and religious obligations, activity conflicts and academic responsibilities are valid excuses, but that I may not be excused for social and work reasons.
8. Participate with motivation, dedication, sportsmanship, and self discipline.
9. Comply with all Brookings High School, activity department, Board of Education, ESD Athletic Conference and SDHSAA rules and policies as applicable.
10. Abide by all rules as established by my advisor, coach, or director.

We acknowledge that we have read and understand these Brookings High School Activities Department policies, and agree to comply with them in all respects.

Student Signature

Parent/Guardian Signature

Date

Date