

# LONDONDERRY SCHOOL DISTRICT ATHLETIC AGREEMENT

This agreement has been designed to bring an understanding between the administration, coaches and parents. We request that all participants read and sign this agreement, indicating full knowledge of the rules, regulations and dedication that participation in the designated program requires. Coaches may also have an additional contract.

In order for a student to be eligible for participation in the athletic programs, an athlete must meet the following NHIAA and Londonderry School District regulations:

- A. A student may not be nineteen years of age before September 1<sup>st</sup>.
- B. A student must pass five (5) units of work during the previous quarter. For the fall, the spring ranking quarter is used from the previous school year. The determination of academic athletic eligibility is based upon report card grades and it is made only on the day that the report cards are issued and not before that date.
- C. A student may not participate in interscholastic athletics for more than eight (8) consecutive semesters.
- D. A student must pass a physical examination prior to the beginning of the athlete's high school career. In every subsequent year, athletes shall complete an updated medical form signed by the parent and submitted to the athletic department.
- E. Athletes may participate in an outside sport during their period of high school competition. However, priority must be given at all times to the high school team, its practices and contests. Failure to do so will result in sanctions by the NHIAA. See below....  
NHIAA Penalties: Any student athlete who violates this rule for the for the first time shall be declared ineligible for the next 4 consecutive interscholastic events or 3 weeks of a season in which the athlete is a participant, whichever is greater. This penalty is effective from the date of his or her last participation in a high school sport. Any student athlete who violates this rule a second time or subsequent time shall be declared ineligible for participation in any high school sport for the balance of the school year.

An athlete may not quit one sport and try out for another after the season has begun without mutual consent of the coaches and Athletic Director.

Students must ride to and from all athletic events on transportation provided for them by the school. Students may only be released to their parents or guardians.

Any student who has been suspended or whose conduct or character is such as to reflect discredit upon the school may be declared ineligible.

A student who has been injured and is seen or referred to a doctor must have a written release from the physician to be reinstated.

SEE REVERSE SIDE

**Completion of the sport's season is required to be eligible for an award. Any deviation from this will be determined by the coach, Athletic Director and Principal.**

**To participate in a school activity, a student must be present in school on the day of the activity. If the activity is on a non-school day, the student must be present on the last day prior to the activity. A student dismissed from school on the day of an activity or on the last school day prior to a non-school day activity, must return to school prior to the close of the school day. A waiver can be granted by an Assistant Principal in order to be eligible for participation in the school activity.**

**Transfer, use or possession of any form of tobacco, alcoholic beverages, drugs, drug paraphernalia, narcotics or hallucinatory agents by athletes is prohibited on or off school property. Disciplinary action consistent with the disciplinary code will be enacted as well as disciplinary ineligibility from the athletic program FOR THAT SPORT SEASON. Should the infraction occur on School District Property, or at a school related event, District Policy JFCH/JFCI states that the athlete shall be suspended from participation for a period of 180 school days. The suspension can be reduced to 90 school days upon successful completion of the Londonderry High School Alcohol/Drug Educational Intervention Program.**

**It is understood that any athlete that participates in a sport is subject to injury. All injuries must be reported to the athletic trainer.**

**Athletes are financially responsible for all uniforms and equipment issued to them. Students who cannot account for the equipment issued to them will receive no further equipment until settlement is made.**

**A participant in the Interscholastic Athletic Program must be covered by an insurance policy. The accident policy offered to students by the school is acceptable for all sports.**

**Any action that results in the disqualification of a player from a game will be an automatic one game suspension on the next game date. There is a two (2) game suspension for fighting. The player must meet with the Athletic Director before reinstatement.**

**I have read, agree and understand the above athletic agreement. I hereby give my son/daughter permission to participate in the interscholastic athletic program at Londonderry High School.**

**Athlete Name (please print)\_\_\_\_\_Sport\_\_\_\_\_**

**Athlete Signature\_\_\_\_\_**

**Parent/Guardian Signature\_\_\_\_\_**

**Date:\_\_\_\_\_**

## HAZING

It is the policy of the Londonderry School District that no student or employee of the District shall participate in or be members of any secret fraternity or secret organization that is in any degree related to the school or to a school activity. No student organization or any person associated with any organization sanctioned by the School Board shall engage or participate in hazing.

For the purposes of this policy, hazing is defined as an activity which recklessly or intentionally endangers the mental or physical health or safety of a student for the purpose of initiation or admission into or affiliation with any organization sanctioned or authorized by the School Board.

"Endanger the physical health" shall include, but is not limited to, any brutality of a physical nature, such as:

- whipping;
- beating;
- branding;
- forced calisthenics;
- exposure to the elements;
- forced consumption of any food, alcoholic beverage, drug or controlled dangerous substance;
- or any forced physical activity which could adversely affect the physical health or safety of the individual.

"Endanger the mental health" shall include any activity, except those activities authorized by law, which would subject the individual to extreme mental stress, such as:

- prolonged sleep deprivation,
- forced prolonged exclusion from social contact which could result in extreme embarrassment,
- or any other forced activity which could adversely affect the mental health or dignity of the individual.

Any hazing activity upon which the initiation or admission into or affiliation with an organization sanctioned or authorized by the School Board is conditioned, directly or indirectly, shall be presumed to be a forced activity, even if the student willingly participates in such activity.

Examples of behavior that could be considered hazing include being forced to:

1. Destroy or steal property.
2. Be tied up, taped or confined in a small space.
3. Be paddled, whipped, beaten, kicked or beat up others.
4. Do embarrassing, painful or dangerous acts.
5. Be kidnapped or transported and abandoned.
6. Consume spicy or disgusting concoctions.
7. Be deprived of sleep, food or hygiene.
8. Engage in or simulate sexual acts.
9. Participate in drinking contests.
10. Be tattooed or pierced.

This policy is not intended to deprive School District authorities from taking necessary and appropriate disciplinary action toward any student or employee. Students or employees who violate this policy will be subject to disciplinary action which may include expulsion for student and employment termination for employees.

A copy of this policy will be furnished to each student and teacher in the School District.

### Statutory & Regulator References:

RSA 631:7

**LONDONDERRY SCHOOL BOARD**

Adopted: November 30, 2004

**HAZING COMPLAINT PROCEDURE**

1. Administrators, Athletic Coaches, Co-Curricular Advisors will address and review the Hazing Policy and procedure at the start of each season and the initial meeting of each school sponsored extra/co-curricular program. In addition, at least once during each season and/or once during each semester, coaches and advisors of the extra/co-curricular programs will review the policy.
2. When a student believes that s/he has been subject to hazing, the student shall promptly report the incident, orally (and have that reduced to writing) or in writing, to the building principal and/or assistant principal.
3. The principal and/or the assistant principal shall conduct a timely, impartial, thorough and comprehensive investigation of the alleged hazing.
4. The principal and/or the assistant principal shall prepare a written report summarizing the investigation and recommending disposition of the complaint. Copies of the confidential report shall be provided to the complainant, the accused and others directly involved, as appropriate. A confirmed report of hazing will be reported to the Police Department.
5. If the investigation results in a substantiated finding of hazing, the principal shall recommend appropriate disciplinary action, as circumstances warrant, in accordance with the Code of Conduct. Additionally, the accused may be subject to disciplinary action by the coach or sponsor, up to and including removal from the activity.
6. Every student who participates in a sport or extra/co-curricular activity must sign and return the Hazing Policy (JICFA) and accompanying procedure (JICFA-R) prior to the start of the first practice or first meeting of the extra/co-curricular activity.

**LONDONDERRY SCHOOL BOARD**

Adopted: November 30, 2004

PRINT NAME \_\_\_\_\_

SPORT \_\_\_\_\_

I, \_\_\_\_\_ have read and understand the Londonderry School  
Signature of Student  
Hazing Policy JICFA and Hazing Complaint Procedure JICFA-R. Date: \_\_\_\_\_

I, \_\_\_\_\_ have read and understand the Londonderry School  
Signature of Parent  
Hazing Policy JICFA and Hazing Complaint Procedure JICFA-R. Date: \_\_\_\_\_

Athlete's Name \_\_\_\_\_

Grade: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/ Guardian \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mother's Work Phone: \_\_\_\_\_

Father's Work Phone: \_\_\_\_\_

Pager Number: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

In Case of Emergency Contact: \_\_\_\_\_

(Other than parent / guardian)

Athlete's Date of Birth: \_\_\_\_\_

\_\_\_ / \_\_\_ Weight: \_\_\_

Phone: \_\_\_\_\_

Known Medical Conditions: \_\_\_\_\_

Physician Phone: \_\_\_\_\_

Allergies to insect / medications: NO / YES, \_\_\_\_\_

Physician: \_\_\_\_\_

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Please list any previous significant injuries:

Have you been sick or had any injuries in the past 6 months? YES / NO If yes, please explain:

Have you seen or been treated for this injury or illness by a doctor? YES / NO If a doctor has treated you, what was the diagnosis?

You must give a medical clearance note from the treating physician to the athletic trainer before trying out for a sport if you have seen a doctor for an injury or illness in the past six months.

Have you ever suffered from a diagnosed concussion? Yes / No If yes, how many and when was the last one? \_\_\_\_\_•

Have you ever been told by a doctor not to participate in a particular sport? Yes / No If yes, why? \_\_\_\_\_

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Do you have any medical conditions such as asthma, diabetes, heart-related conditions that the athletic trainer should be aware of? Yes / No if yes, what? \_\_\_\_\_

If you have a medical condition which requires medication please advise the athletic trainer: (asthma Inhalers / insulin / Bee sting kits etc.) \_\_\_\_\_

Have you ever suffered from dizziness, fainting, severe headaches or chest pain? Yes / No If yes, have you been seen by a physician? Yes / No. What was the diagnosis? \_\_\_\_\_•

Are you required to wear any protective devices such as knee / ankle braces etc.? Yes / No if yes, what are your requirements? \_\_\_\_\_

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Are there any other medical conditions, injuries or concerns that the athletic trainer needs to be advised of in order to provide appropriate treatment to your son / daughter? \_\_\_\_\_

11. Are you missing or do you have impairment of any paired organs? Yes / No if yes, what?

## Parental Consent Form

Signatures are required for the information you received in your athletic department packet. This includes the athletic agreement, risk acknowledgment statement, consent to treat and medical history questionnaire. These signatures are good for the current school year. The athletic office must be notified of any changes in status of the athletes' emergency information or injury / illness status.

1. **Athletic Agreement:**  
I, the parent / guardian and athlete have read, understand and agree to the requirements listed in the athletic agreement (goldenrod form)
  
2. **Medical History / Emergency Information:**  
I, the parent / guardian, athlete have filled out the medical history and emergency information form (pink form) and agree that the information provided is correct / accurate and true to the best of my knowledge. I give consent to my athlete to participate in the athletic programs offered at Londonderry High School.
  
3. **Consent to Treat:**  
I understand that Londonderry High school employs a Certified Athletic Trainer who is qualified to assess, treat, and rehabilitate most injuries my son or daughter may incur while participating in our interscholastic athletic programs. I give permission for the Athletic Training Staff to assess, treat, rehabilitate and refer this athlete to a physician or emergency room as appropriate.
  
4. **Risk Acknowledgment Statement:**  
I understand the risks involved in athletics range from minor to severe. I recognize the possibility that my child might die, become paralyzed, suffer from brain damage or other serious, permanent injury as a result of participating in sports. I realize that neither the protective equipment and padding used in the sport, the safety rules and the procedures of the sport, the coaching instruction received, nor the athletic training care provided to athletes will guarantee safety or prevent injuries they might sustain. I further agree to accept these risks as a condition of my child's participation in this sport. I agree not to hold the Londonderry School District, its coaches, or athletic training staff responsible for any injury, loss, or damage that occurs to my child as a result of sports participation.
  
5. A participant in the Interscholastic Athletic Program must be covered by an insurance policy. The accident policy offered to students by the school is acceptable for all sports

I have read, fully understand and agree to all of the above statements 1-5 and I do not have any questions.

I understand that by signing this form, this covers any sport my athlete participates in for the school year.

Athlete's Name: \_\_\_\_\_ (please print)

Parent / Guardian Name: \_\_\_\_\_ (please print)

Athlete's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_.

This form is not valid unless both athletes and parent/ guardian signatures are obtained.