



Alameda Education Foundation Middle School Sports Athlete Packet

a 501(c)(3) nonprofit, TAX ID: 94-2867769
P. O. Box 1363, Alameda, CA 94501

Dear Parent or Guardian,

Welcome to the Alameda Education Foundation's Middle School Sports Program!

This packet includes all the forms and information needed by a participant in the Alameda Education Foundation Middle Sports Program for AUSD Middle Schools. Please take the time needed to review the information in this packet. All information must be collected by the Head Coach at your school before the student-athlete can participate.

Only one packet per student-athlete per year needs to be completed regardless of how many sports the student-athlete participates in. All student-athletes are required to have medical insurance. If you do not have insurance, there is an application form that you can get from the main office. Students must maintain a minimum GPA of 2.0. Tutoring is available should it be needed.

At AEF, we believe sports are an integral part of a quality educational experience for students. There is currently no district funding for Middle School Sports. The AEF After-School Sports Program is funded through local and corporate donations.

In order to sustain the program, each athlete is expected to contribute a participation fee. This may be done via a direct donation and/or participation in AEF sponsored fundraising mechanism. No athlete will be turned away for financial reasons because there is the opportunity for fundraising. Your student's coach will provide you with more information on fees and fundraising or you may find that on our website at www.AlamedaEducationFoundation.org.

If you have any questions regarding the material in this packet, please feel free to email the Athletic Director at AEFSports@AlamedaEducation.org.

Thank you,
Vicki Sedlack, AEF Middle School Athletic Director
Bill Sonneman, AEF President



Chipman Cougars
500 Pacific Avenue



Lincoln Lions
1250 Fernside Boulevard



Wood Beavers
420 Grand Street



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Guidelines & Policies: To All Athletes and Parents/Guardians:

Item 1. Informed Consent: Please read and initial Signature Form, page 3

The Alameda Education Foundation has a responsibility to make you aware of the dangers of participation in any form of athletic competition. I am asking that you carefully read over the statement below with your son or daughter, sign and return it to school.

I am aware of the potential dangers of participation in interscholastic athletics – both in practice and competition. I realize that there is a risk of being injured in all sports, no matter how many precautions are taken. I further realize that this risk of injury may be severe, including varieties of contusions, scrapes, cuts, sprains, fractures, brain injuries, concussions, **PARALYSIS, OR EVEN DEATH**. I also realize that my son/daughter needs to follow all of the guidelines given by the coaching staff regarding training rules, safety rules, proper use of equipment, legal and safe playing techniques, and any and all other safety procedures. I understand that even if all of the above is done, my son/daughter may still incur injury through participation in athletics.

I understand that photos of athletes may be published unless I submit a written no-photo request to AEF.

Item 2. Athlete's Contract: Please read and initial Signature Form, page 3

I will conduct myself in a manner respectful to myself and others, practice self-discipline, and obey the rules and regulations of the school. Any violations on my part that result in disciplinary actions from the school will apply to my participation in the sport at the coach's and administration's discretion. Any violations during an athletic contest will affect my opportunity to participate in future games/matches/meets at the discretion of the coach and administration.

I will maintain an overall minimum grade point average of 2.0. Grades will be checked in accordance with school policy and tutoring is available should I need it.

Unsportsmanlike conduct - including fighting, pushing, shoving, throwing things, cursing or taunting – will not be tolerated before, during, or after an athletic event. If a player or coach engages in fighting, pushing, shoving or hitting, that player or coach will be suspended for the remainder of the season. **If a player or a coach is ejected during an athletic contest, that player or coach will be suspended from the subsequent contest. A second ejection during the year will result in suspension for the remainder of that year.**

Item 3. Transportation Policy: Please read and initial Signature Form, page 3

As a parent of a participant in the AEF Middle School Sports Program, I understand that my student athlete may travel to other schools within Alameda and to neighboring cities to participate in practice, scrimmages and/or games. I/We release Alameda Education Foundation, AUSD and the coaching staff of all responsibility for my son/daughter relating to transportation. If financial assistance is requested for public transportation, AEF will provide a pass for public transportation (pre-arrangement is required—those requiring assistance, should contact the AEF office at 510.337.7189). Carpooling is suggested but all parties involved are fully responsible for arrangements and liability.

Item 4. Spectators Code of Conduct: Please read and initial Signature Form, page 3

All parents/guardians, students and spectators shall conduct themselves in a respectful manner conducive to modeling good sportsmanship. They shall refrain from all conduct which tends to degrade, bait, intimidate or otherwise discredit their players, opponents, officials, athletes or coaches.

Item 5. Off Campus Training Rules: Please read and initial Signature Form, page 3

Practices may include off campus training. Participants will practice pedestrian safety rules and be respectful of others and property.

Item 6. Participation Fee/Fundraising: Please read and initial Signature Form, page 3

Participants are expected to make a financial contribution to the AEF Middle School Sports program via a direct donation and/or participation in a fundraising program as outlined by AEF.



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School Year: <u>2009-2010</u>
School: _____
Grade: _____
Circle one: Male / Female
Circle: Volleyball
Basketball
Track & Field

SIGNATURE FORM

Athlete's

Legal Name (please print): _____

➤ **Item #1 Informed Consent:** Parent/Guardian Initial _____ Student Initial _____

Understanding the information, I give my permission for my student athlete to participate in Alameda Education Foundation Middle School Sports Program sport. I understand that photos of athletes may be published unless I submit a written no-photo request to AEF.

➤ **Item #2 Athlete's Contract:** Parent/Guardian Initial _____ Student Initial _____

I have read and understand the guidelines and consequences of the Athlete's Contract.

➤ **Item #3 Transportation Policy:** Parent/Guardian Initial _____ Student Initial _____

I have read the policy and release AEF, AUSD and all coaches of all liability related to transportation. I understand that arrangements I make with other parents are fully my responsibility.

➤ **Item #4 Spectators Code of Conduct:** Parent/Guardian Initial _____ Student Initial _____

I have read the statement on the expected behavior at athletic events and agree to abide by the Code of Conduct indicated. I further agree to advise anyone I may bring to a Middle School Sports athletic contest of the stated rules.

➤ **Item #5 Off-Campus Training Rules:** Parent/Guardian Initial _____ Student Initial _____

I will practice pedestrian safety rules and be respectful of others and property.

➤ **Item #6 Participation Financial Contribution:** Parent/Guardian Initial _____ Student Initial _____

I will contribute to the AEF Middle School Sports program via a direct donation and/or fundraise.

WE HAVE READ, UNDERSTAND AND AGREE TO COMPLY WITH THE INFORMATION PRESENTED IN THE ATHLETIC PACKET FOR THE ALAMEDA EDUCATION FOUNDATION MIDDLE SCHOOL SPORTS PROGRAM

Student Signature: _____ Date _____

Parent/Guardian(s) Name (please print): _____

Parent/Guardian Signature: _____ Date _____

CONTACT INFORMATION:

Address: _____
Street City Zip Code

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____



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School: _____
Grade: _____
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Circle: Volleyball
Basketball
Track & Field

Medical Release Form

Athlete's

Legal Name: _____ Birth Date: _____ Age: _____
[please print] Last Name First Name

In the event that I (parent/guardian) cannot be reached, I hereby authorize the administrator, or coach in charge, as agent to the student, to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by and is to be rendered under the general or special supervision of any physician or surgeon licensed under the provision of the Medical Practice Act., whether such diagnosis or treatment be rendered at the office or at the hospital.

Every student participating in interscholastic athletics must be covered by medical insurance. Please indicate the insurance carrier that insures your son/daughter, the policy number, and the name of your family physician. **If you do not have insurance, you must purchase an insurance policy. Please contact your school office for an application.**

INSURANCE CARRIER: _____ POLICY #: _____

NAME OF PHYSICIAN: _____ PHONE #: _____

Known Allergies: _____

Is the student currently taking any medication? _____ If so, please list: _____

Is the student allergic to any medication? _____ If so, please list: _____

Has the student had any major operations or serious injuries? _____ If so, please list: _____

NAME OF PERSON(S) TO BE CONTACTED IF PARENTS/GUARDIANS ARE NOT AVAILABLE

Name: _____ Home/Cell Phone: _____ Work Phone: _____

Name: _____ Home/Cell Phone: _____ Work Phone: _____

Parent/Guardian Name (Print): _____ **Phone:** _____

SIGNATURE OF PARENT/GUARDIAN: _____ **Date:** _____