

THE HOWARD COUNTY PUBLIC SCHOOL SYSTEM ATHLETIC PARTICIPATION FORM

It is the goal of the Howard County Public School System's Interscholastic Sports Program to provide a safe and supportive environment for all student athletes. We believe athletes need to develop skills that will teach good sportsmanship, self-discipline, and relationship skills. Toward that end, coaches, students, and parents should be aware of school and county policies and procedures that enhance these goals.

Please read carefully the conditions of participation. Please complete and sign Section V and return this form to the appropriate coach or athletic director **prior** to your student's taking part in any sport-related activity. We look forward to your child's active participation in our athletic program and anticipate an excellent season.

Section I - Guidelines for Participants

For students to be eligible to participate in the Howard County Interscholastic Sports Program they must have on file at their high school proof of meeting the following requirements. Requirements are to be met prior to the first practice for any sport.

- A. A medical insurance policy number covering the sport in which they wish to participate.
- B. A physical examination by a physician **after April 1** of the preceding school year.
- C. Parental permission as provided below.
- D. Verification (usually a copy of birth certificate) that the student has not reached 19 years of age prior to August 31st. Additionally, any student who has been awarded a high school diploma is not eligible to compete. (MPSSAA Handbook)
- E. Verification that the student is a bona fide resident of the attendance area of the school. Documents of proof are a current utility bill (excluding a cell phone bill), a copy of a lease or rental agreement, a copy of a deed of trust, and a current property tax bill. Address on the document of proof cannot be a post office box. For students who have registered under the Multiple Family Disclosure (MFD) guidelines, proof of residence in accordance with MFD procedures must be on file.

Section II - Other Eligibility Requirements and Howard County Public School System Policies

These requirements must be verified as having been met prior to the first competition for any sport.

A. Academic Eligibility

A student must comply with the Academic Eligibility for High School Extracurricular Activities Policy (Board of Education Policy #10124-R). "A full-time student earns academic eligibility to participate in extracurricular activities by passing all authorized courses for the marking period and maintaining a 2.0 grade-point average with no failing grades for the marking period which governs eligibility for that activity. This provision does not apply to incoming 9th grade students for fall eligibility." *Applicable parts of Policy 10124 are in the Secondary Student Handbook.*

B. Residency Requirement

Following Section I – E above, each student must have on file in the school proof of bona fide residency in the attendance area of the school on whose athletic team they wish to play. Athletic eligibility for students who are reassigned from the school in their attendance area is governed by Policy 3201.

C. Drug and Alcohol Policy

Students must comply with Policy 3451, Alcohol, Other Drugs, Prescription Medication and Over-the-Counter Products. Consequences for violations of Policy 3451 are stated in the Policy itself. Depending on the specific violation of the policy, a student may be excluded from extra-curricular participation from as little as 30 days to as much as the remainder of the semester and the entire next semester. *Applicable parts of Policy 3451 are in the Secondary Student Handbook.*

D. Violence and School Safety (Policy 3445) and Howard County Public School System (HCPSS) Codes of Conduct

Bullying--defined in the HCPSS Code of Conduct--is prohibited. Threats, profanity, defamation, harassment, assault, battery, hazing, and intimidation are prohibited under Policy 3445; the policy covers students and third parties (parents and spectators). Participation (one's involvement even though the student doesn't create the harm to another) in any intentional or reckless act (action taken or situation created that involves mental or physical discomfort, embarrassment, humiliation, harassment, or ridicule) directed against another for the purpose of initiation into, affiliation with, or maintenance of membership in any school-sponsored activity, organization, club, or athletic team is considered "hazing" and is a violation of Policy 3445. Policy 3445, the HCPSS Code of Conduct, and the HCPSS Code of Conduct for Interscholastic Student-Athletes will be administered in response to any student violation. Parents violating Policy 3445 may be banned from all athletic events and/or practices for the remainder of the school year. Parents or athletes who become aware of inappropriate and unacceptable behaviors should contact a coach, athletics and activities manager, or school administrator. *Applicable parts of Policy 3445 and the entire Code of Conduct are in the Secondary Student Handbook.*

E. Student Assault and/or Battery on School Staff (Policy 3414)

In addition to a substantial suspension from school, a student violating Policy 3414 will be ineligible for participation in extra-curricular activities for the remainder of the current semester and for the next consecutive semester. *Applicable parts of Policy 3414 are in the Secondary Student Handbook.*

F. Years of Participation

Students may participate in interscholastic athletic contests for a maximum of **three** seasons in any one sport in grades 10, 11, and 12. Students who participate on an interscholastic team in grade 9 will have maximum athletic eligibility of four seasons in that one sport. (MPSSAA Handbook)

G. Amateur Status

Students must maintain amateur status. (MPSSAA Handbook)

Section III - Coach/Parents/Participants

- A. Coaches have the authority over who becomes a member of the team, which students play, and who is removed from the team. Coaching strategy is determined by the coaching staff. Accepting a position on a team includes acceptance of these procedures by both the student and the parent/guardian. Thus, these issues are not open to parent/coach discussion.
- B. Coach, athlete, parent meetings are encouraged to resolve any other issues creating concern or dissatisfaction. Such meetings must be arranged at a mutually acceptable time and place.
- C. Any discussion between a coach and a parent should be conducted in a calm, non-threatening manner, or the discussion should be immediately terminated to be continued only by appointment with the Athletic Director.
- D. Coaches will fulfill all the duties and responsibilities mandated by their contract and listed in the Handbook for Interscholastic Sports Policies and Procedures.
- E. Parents and athletes should note that some athletic events may end after 11:00PM.

Section IV – Photo Release

I hereby grant permission to HCPSS to use my student’s photograph on the school’s website, the boosters’ website, or in other HCPSS printed publications. Permission Granted Permission Not Granted

Section V - Agreement

The Department of Education does not provide health/accident insurance for participants in the Interscholastic Sports Program. Consequently, the Department of Education is not liable for any medical expenses incurred while participating in the Interscholastic Sports Program. My child has my permission to participate in the sport mentioned below.

PLEASE PRINT

Student: _____ *Insurance Co.: _____
Date of Birth: _____ Age: _____ *Policy Number: _____
School: _____ Grade: _____ Sport: _____
Var. JV Freshman (circle one)

My signature below indicates that I have read the above information and confirms that I am a bona fide resident of Howard County and reside at the address below. I am aware of the policies and rules governing eligibility and participation for athletic participation. I am also aware of the consequences for violating these policies.

_____	_____	_____	_____
(Parent/Guardian Signature)	(Date)	(Street Address)	(City, State, Zip)
_____	_____	_____	_____
(Student Signature)	(Date)	(Street Address)	(City, State, Zip)
_____	_____	_____	_____
(Home Phone Number)	(Mother’s Work Phone Number)	(Father’s Work Phone Number)	

*This form cannot be accepted without above information.