

**ATHLETIC PARTICIPATION**  
**PLEASE PRINT LEGIBLY**

Date \_\_\_\_\_

\_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ at  
(Athlete's Name) (@ start of sport season)

\_\_\_\_\_ Home Phone \_\_\_\_\_  
(School Name)

This is to certify, that I grant permission for my son ( ), daughter ( ), to participate in  
\_\_\_\_\_ for the current school year at Northampton High school.

**(Name of Sport)**

\*\*\*\*\*

**Important:** For students transferring from another school **besides** JFK middle school in Florence, MA.  
My son/daughter was enrolled at

School attended \_\_\_\_\_ Grades enrolled \_\_\_\_\_  
(School Name)

School Address \_\_\_\_\_  
\*\*\*\*\*

**RISK ACKNOWLEDGMENT**

I understand that this sport can be an inherently dangerous activity and that there are genuine and certain risks to anyone who engages in this activity. Due to the nature of sport and physical activity, I understand that the risks involved include, without limitation a full range of injuries, including catastrophic injury resulting in permanent paralysis, brain injury or death. I knowingly assume responsibility for any and such risk and any and all such injuries. In furtherance therefore, I hereby voluntarily choose to participate in this sport and accept this risk as a condition of my participation.

**INJURY WAIVER**

I hereby absolve the Northampton School Department of any responsibility for injury or accident incurred by \_\_\_\_\_.  
(Athlete's Name)

**BONA FIDE TEAM MEMBERS (MIAA RULE 45)**

(Loyalty to the High School Team)

A bona fide member of the school team is a student who is regularly present for, and actively participates in, all team practices and competitions. Bona fide members of a school team are precluded from missing a high school practice or competition in order to practice or compete with an out of school team. Any student who violates this rule is ineligible for the next two contests or two weeks (whichever is greater) immediately upon confirmation of the violation. Also, any student who violates this standard becomes ineligible for the MIAA tournament(s) in that sport for that season.

**(MORE IMPORTANT INFORMATION ON OTHER SIDE)**

## NORTHAMPTON HIGH SCHOOL POLICY ON CHEMICAL HEALTH

Northampton High School will enforce a **ZERO TOLERANCE POLICY** on chemical health.

### THIS POLICY STATES:

*From the first allowable day of Fall practice, through the end of the academic year or final athletic competition of the year, whichever is later, a student shall not, regardless of the quantity, use or consume, possess, buy/sell or give away any beverage containing alcohol; any tobacco product; marijuana; steroids; or any other controlled substances. It is not a violation for a student to be in possession of a legally defined drug specifically prescribed for the student's use by his/her doctor.*

### **Minimum Penalties**

#### **(Out of sport season)**

1. **First violation:** When the Principal or designee confirms, following an opportunity for the student to be heard, that a violation occurred, the student shall lose eligibility for the next consecutive interscholastic contests totaling 25% of all interscholastic contests in that sport. No exception is permitted for a student who becomes a participant in a treatment program.
2. **Second and subsequent violations:** When the Principal or designee confirms, following an opportunity for the student to be heard, that a violation occurred, the student shall lose eligibility for the next consecutive interscholastic contests totaling 60% of all interscholastic contests in that sport.

#### **(During sport season)**

1. **First Violation:** When the principal or designee confirms, following an opportunity for the student to be heard, that a violation occurred, the student shall lose his/her ability to participate in any interscholastic contests. No exception is permitted for a student who becomes a participant in a treatment program. It is recommended that the student be allowed to continue participating in practices.

If the penalty period occurs with less than 25% of games remaining, the penalty shall carry over to the student's next season of actual participation until an accumulative 25% of games is reached. This may affect the eligibility status of the student during the next academic year.

2. **Second Violation:** When the principal or designee confirms, following an opportunity for the student to be heard, that a violation occurred, the student will not be allowed to participate in any interscholastic contests for one full year.

We are concerned about Northampton High school students who are using tobacco, alcohol, and other drugs. In our opinion, the Northampton High School Policy on Chemical Health, if taken seriously, is one way to curtail adolescent use. It is difficult, however, for us to enforce this policy on our own and therefore we are asking for your help.

When you and your son/daughter sign this form, please talk to him/her about the importance of this policy, and if possible, tell your son/daughter that you fully support the intent of this policy. Please let him/her know that if you become aware of him/her using any non-approved substance, during the season, that **you will contact the Director of Athletics with full expectation of the stated penalties.**

When coaches first hear of any violations of the this Policy on Chemical Health, they are directed to contact the Director of Athletics who will contact the parent/guardian with this information. Penalties will be assessed when confirmation of the violation has been received. Any violations that occur during school functions, including practices, games and travel situations will be subjected to the NHS School Code of Conduct.

Please understand that our athletes represent our school and community and we know that many of our student athletes do choose to be tobacco, alcohol, and other drug-free. We also know that many of these athletes would choose not to use, even if there was no policy.

We need your help as we try to address this one aspect of adolescent behavior. We look forward to working in partnership with you.

Our signatures below indicates that we have read this entire document and understand it completely.

Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Phone Numbers: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

**ATHLETIC USER FEE**

Due to budgetary constraints, the Northampton School Committee has authorized the Department of Athletics to establish an Athletic User Fee of \$125.00 for each student per sport. However, if a student plays more than one sport during the course of the academic year, the fee is reduced for subsequent sports. A student will pay \$125.00 for their first sport, no matter what season (Fall, Winter, Spring). If that student plays a second sport they will only pay \$100.00 either Winter or Spring. If the student plays a third sport in the same academic year (Spring), they will pay only \$75.00 for that sport. There will be a \$500.00 cap per family per year. This process will repeat for the next school year. These fees pay for all transportation, game officials, police, night game personnel, and a portion of supplies, game equipment, and maintenance of facilities. The income from athletic user fees plus gate receipts accounts for approximately 60% of our total athletic budget. Without this income, athletics would be extremely limited in scope or nonexistent. Please make your check (no cash) payable to Northampton Athletics and write your son's/daughter's name and sport in the memo section of the check.

\_\_\_\_\_ This is my son's/daughter's first sport this school year or,  
\_\_\_\_\_ played \_\_\_\_\_ at Northampton  
(name of son/daughter) (name of sport)

High school this school year.

Amount Due \$\_\_\_\_\_ Amount Enclosed \$\_\_\_\_\_ Check Number \_\_\_\_\_

(PLEASE NOTE: ATHLETIC USER FEE IS ARE WAIVED FOR FALL CREW, FENCING, AND SPRING CREW)

**ATHLETIC USER FEE WAIVER**

No student will be denied the opportunity to participate due to financial constraints. Students who have their name on file with the school, for the Federally funded free/reduced lunch program, are exempt from the athletic user fee. Applications are available in the High School office. If you are in a position to pay in installments, include the number of installments and amount of money. If you have any other issue regarding payment, please call me at 587-1356

**MUST be completed if filing for a waiver.**

- \_\_\_\_\_ 1. My son/daughter have their name on file for the free/reduced lunch program.
- \_\_\_\_\_ 2. Am capable of paying \_\_\_\_\_ installments of \$ \_\_\_\_\_ throughout the season.

Complete information below and return with your first installment check (no cash) payable to Northampton Athletics with the rest of the forms.

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

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

Address \_\_\_\_\_

\_\_\_\_\_

**SPORT PHYSICAL**

\_\_\_\_\_ I have checked with the (School Nurse / Director of Athletics) and have been told my  
(circle one)  
son/daughter has a current physical on file dated \_\_\_\_\_.

\_\_\_\_\_ I have enclosed a copy of my son's/daughter's current signed physical form from his/her physician.

\_\_\_\_\_ My child will be having a sports physical with his/her own physician on \_\_\_\_\_.  
I will have my son/daughter give the completed signed physical form to the Director of Athletic. (Reminder: Your child will not be able to participate until a current physical has been verified by the Director of Athletics.)