



# Point Arena High School

270 Lake Street • P. O. Box 7

Point Arena, CA 95468

707.882.2134 •

Fax 707.882.3453

## 2024-2025 ATHLETIC PACKET

Mr. Marc Feliz, Principal

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### PLEASE READ and REVIEW WITH YOUR STUDENT

Please - Complete the following forms and submit these to the Athletic Director or coach.

1. Athletic Physical
2. Concussion Information Sheet
3. Athletic Participation and Drug Testing Parent Permission Slip
4. Androgenic/Anabolic Steroid Use Agreement
5. Acknowledgment and Assumption of Potential Risk.
6. 2024-2025- Athletic Code
7. Ejection Policy Notification Form
8. Parent Release Form
9. Parent Consent and Medical Authorization For Field Trips.
10. Provide Proof of Health Insurance  
(If you do not have insurance, please go to Myers-stevens.com.)
11. Screen Your Teen Awareness

All packets and **Board Policies** will be available on our Website and at the Point Arena High School <http://pointarenaschools.org/pahs/>

Point Arena School District prohibits discrimination, intimidation, harassment (including sexual harassment) or bullying based on a person's actual or perceived age, ancestry, color, disability, ethnicity, gender, gender expression, gender identity, genetic information, immigration status, marital status, medical information, national origin, parental status, pregnancy status, race, religion, sex, sexual orientation, or association with a person or group with one or more of these actual or perceived characteristics..) For questions or complaints, contact: Title IX Coordinator: Marc Feliz (707)882-2134 and Michelle Egger (707) 882-2131, 504 Coordinator: Isis Skarra-Pergler (707)882-2134 or iskarra@pauhs.org , Title II Coordinator: Warren Galletti (707)882-2803 or wgalletti@mcn.org

**ALL OF THESE FORMS MUST BE RETURNED TO YOUR COACH AS SOON AS POSSIBLE (Before any practice or play can start)**

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**YOU MUST HAVE A CURRENT SPORTS PHYSICAL BEFORE YOU CAN START PRACTICE OR COMPETITION.**

Warren Galletti  
Superintendent  
270 Lake Street • P. O. Box 7  
Point Arena, CA 95468  
707•882•2134 Ext. 214



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Re: Point Arena High School Athletes

Dear Parent or Guardian,

As you may know, the high school has a mandatory drug testing program which includes an initial drug test and random drug testing throughout the athletic season for high school athletes. All 9-12<sup>th</sup> grade athletes must be drug tested prior to the season (before practice and competition occurs). Athletes are then included in the weekly random drug testing program for the duration of their sport season.

Drug testing is part of a district wide effort to support healthy and mindful choices as students grow and develop into young adults. High school athletes must also have an athletic physical prior to participation in high school sports.

**If you wish to have your high school athlete participate in athletics for the 2024-2025 school year, please complete the attached Athletic Participation and Drug Testing Parent Permission Slip and submit it to Athletic Director via the COACH or directly to the A.D. at Point Arena High School before completing the physical.** A copy will be made for you, which you will also be required to bring to RCMS when your child completes the athletic physical appointment.

Parents may Call RCMS to schedule an appointment, 882.1704 (Point Arena) 884.4005 (Gualala).

If your student does not complete the athletic physical at RCMS, the drug screening will be completed by the District Nurse.

Results of the drug screening will be revealed only to the parent/guardian(s), and RCMS or the District Nurse will provide the parent/guardian(s) with information regarding support services if there is a concern related to the screening results.

There are two steps to the paperwork process. The **first step** is to complete the following:

- Athletic Participation and Drug Testing Parent Permission Slip

**(Submit to Athletic Director via the PAHS office before completing the physical)**

The **second step** is to complete the following and pick up an Athletic Packet from the coach, complete the required paperwork and submit the forms to the coach.

- Athletic Physical
- Drug Screening through RCMS
- Health Statement and Parent Consent Form.
- Provide Proof of Health Insurance

(If you do not have insurance, please access a form to purchase insurance at [www.myers-stevens.com](http://www.myers-stevens.com))

We are excited about the number of high school students who participate as athletes on the athletic teams, and look forward to a terrific 2024-2025 school year.

Sincerely,

*Mr. Warren Galletti*

Superintendent

**POINT ARENA HIGH SCHOOL**

**HEALTH STATEMENT AND PARENTS CONSENT**

Students Name \_\_\_\_\_

I hereby certify that the above named student is physically fit to engage in sports.

Grade _____	Age _____
Birthdate _____	
Baseball _____	Tennis _____
Bsktball _____	Track _____
VB _____	WR _____
FT. _____	Golf _____
Soccer _____	Cheer- _____

\_\_\_\_\_  
Physician Signature    Date    State License number

Has student had any injury or physical condition that should be watched? \_\_\_\_\_  
If yes, please list: \_\_\_\_\_

\_\_\_\_\_

I hereby give my consent for the above named student to compete in sports. I authorize the student to go with and be supervised by a representative of the school on any trips. In case this student becomes ill or is injured, you are authorized to have the student treated and I authorize the medical agency to render treatment.

We realize that should medical attention be required, the school authorities will try and continue to reach us. However, we wish our child to have medical attention IMMEDIATELY, we do NOT want care to be withheld until we can be reached. If our child needs medical attention locally, we would like him/her to be seen by:

Dr. \_\_\_\_\_ . If this doctor is not available, contact the  
\_\_\_\_\_ Hospital and have him/her see by the doctor on call.

If my child needs medical attention out of town, I give my consent to having him cared for at the discretion of the Point Arena High School authorities and the medical personnel and facilities suggested by the host school.

Parents who feel it necessary for a team member or other student(s) who traveled to the event by school bus, to travel home with them (the parents) from out-of-town events, must complete a form in triplicate and return it to the Principal no later than Wednesday of the week of the event. (Forms are available in the high school office).

I HAVE READ the Health and Consent and the CIF Acknowledgement and Assumption of Potential Risk. I understand and consent to it. I am the parent / legal guardian of

\_\_\_\_\_  
Student's Name  
\_\_\_\_\_  
Parent Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Phone

Please indicate Insurance Coverage
Co. Name _____
Policy No. _____
Address _____

## AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT

As legal custodian of \_\_\_\_\_ a minor, I hereby authorize the principal or his/her designee, into whose care the aforementioned minor pupil has been entrusted, to initiate paramedic/ambulance care or transport for said minor and to consent to any X-ray, examination, anesthetic, medical or surgical diagnosis, treatment, and/or hospital care to be rendered to said minor upon the advice of any licensed physician and/or dentist.

I understand that this authorization is given in advance of any required diagnosis, treatment, or hospital care and provides authority and power to the aforementioned agent(s) to give specific consent to any and all such diagnosis, treatment, or hospital care which a licensed physician or dentist may deem necessary.

This authorization shall remain effective for the full school year unless revoked in writing and delivered to said agent(s). I understand that the **Point Arena Joint Union High School District** its employees and its Board assume no liability of any nature in relation to the transportation or treatment of said minor. I further understand that all cost of paramedic/ambulance transportation, hospitalization, and any examination, X-ray, or treatment provided in relation to this authorization shall be my responsibility.

I understand that the **Point Arena Joint Union High School District** does not provide medical insurance for student injuries but does offer student accident/sickness insurance for voluntary purchase. I have received the information and application for this program.

PLEASE CHECK:  I will enroll my child in the program

I will not enroll my child in the program

Signature of parent or guardian: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Family Doctor</b>	<b>Address</b>	<b>Daytime phone</b>
<b>Health Plan/Insurance (i.e. Blue Cross, Kaiser, etc.)</b>		<b>Group/Policy No.</b>
<b>My child is allergic to the following medications:</b>		
<b>Other medications used:</b>		
<b>My child has the following health problems:</b>		
<b>Signature of Parent or Guardian:</b>		<b>Date:</b>

**(Point Arena High School)**  
**Concussion Information Sheet**

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

<b>Symptoms may include one or more of the following:</b>	
<ul style="list-style-type: none"><li>• Headaches</li><li>• “Pressure in head”</li><li>• Nausea or vomiting</li><li>• Neck pain</li><li>• Balance problems or dizziness</li><li>• Blurred, double, or fuzzy vision</li><li>• Sensitivity to light or noise</li><li>• Feeling sluggish or slowed down</li><li>• Feeling foggy or groggy</li><li>• Drowsiness</li><li>• Change in sleep patterns</li></ul>	<ul style="list-style-type: none"><li>• Amnesia</li><li>• “Don’t feel right”</li><li>• Fatigue or low energy</li><li>• Sadness</li><li>• Nervousness or anxiety</li><li>• Irritability</li><li>• More emotional</li><li>• Confusion</li><li>• Concentration or memory problems (forgetting game plays)</li><li>• Repeating the same question/comment</li></ul>

<b>Signs observed by teammates, parents and coaches include:</b>
<ul style="list-style-type: none"><li>• Appears dazed</li><li>• Vacant facial expression</li><li>• Confused about assignment</li><li>• Forgets plays</li><li>• Is unsure of game, score, or opponent</li><li>• Moves clumsily or displays incoordination</li><li>• Answers questions slowly</li><li>• Slurred speech</li><li>• Shows behavior or personality changes</li><li>• Can’t recall events prior to hit</li><li>• Can’t recall events after hit</li><li>• Seizures or convulsions</li><li>• Any change in typical behavior or personality</li><li>• Loses consciousness</li></ul>

**(Point Arena High School)**  
**Concussion Information Sheet**

**What can happen if my child keeps on playing with a concussion or returns to soon?**

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete's safety.

**If you think your child has suffered a concussion**

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new CIF Bylaw 313 now requires implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

“A student-athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time and for the remainder of the day.”

**and**

“A student-athlete who has been removed may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider”.

You should also inform your child's coach if you think that your child may have a concussion Remember its better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:

<http://www.cdc.gov/ConcussionInYouthSports/>

\_\_\_\_\_  
Student-athlete Name Printed

\_\_\_\_\_  
Student-athlete Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Legal Guardian Printed

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date

Mr. Warren Galletti  
Superintendent  
270 Lake Street • P. O. Box 7  
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707•882•2134 Ext. 214



**ATHLETIC PARTICIPATION AND DRUG TESTING PARENT PERMISSION SLIP**

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

I, \_\_\_\_\_, [parent/guardian's name] give permission for my child \_\_\_\_\_ [child's name] to participate in \_\_\_\_\_ [name of activity] at Point Arena High School during the 2024-2025 school year.

My signature evidences that, as a condition of permitting my child, named above, to participate in the sport or activity of \_\_\_\_\_, I assume the risk of the participation of my child in the activity or sport identified above and that I agree to indemnify and hold harmless Point Arena High School, its teachers, sponsors, coaches, governing board, and other participating agents or employees, either jointly or severally, from and against any and all claims, injuries, damages, losses, costs, or causes of action that may arise in connection with this activity, club, or sport. This includes my assumption of responsibility for any medical expenses arising from any illness or injury caused by my child's participation in the sport or activity described above, and I expressly assume responsibility for all such medical expenses.

I further understand and acknowledge by my signature on this form that it is a condition of my child's participation in the sport/cheerleading identified above that he or she undergo an initial drug test before the athletic season and random drug testing during the time that he or she is participating in that sport. I agree to permit such random drug testing as a condition of my child being allowed to participate in that sport, and waive my child's right to privacy insofar as necessary for such random drug testing. Should my child refuse to submit to such a test when requested by a representative of Point Arena High School, I understand that he or she will be dropped from that sport, and will be ineligible for that sport for the duration of this school year.

My signature evidences that my child has had a sports physical from a licensed physician or that my child has no medical condition or conditions that limit or prevent his or her safe participation in these activities. I accept all responsibility for having such a physical, and further hold Point Arena High School harmless should such a physical not be performed.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Print Name





**Point Arena High School**  
270 Lake Street • P. O. Box 7  
Point Arena, CA 95468  
707.882.2134 • Fax 707.882.3453  
Mr. Marc Feliz  
Principal

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## ANDROGENIC/ANABOLIC STEROID USE AGREEMENT

\_\_\_\_\_  
Print Name of Student – Athlete

As a condition of membership in the CIF, all school shall adopt policies prohibiting the use and abuse of androgenic/anabolic steroids. All member schools shall have participating students and their parents, legal guardian / caregiver agree that the athlete will not use steroids without the written prescription of a fully licensed physician (as recognized by the AMA) to treat a medical condition. (Bylaw 524)

By signing below, both the participating student-athlete and the parents, legal guardian / caregiver hereby agree that the student shall not use androgenic/anabolic steroids without the written prescription of a fully licensed physician (as recognized by AMA) to treat a medical condition. We also recognize that under (CIF) Bylaw 200.D., there could be penalties for false or fraudulent information. We also understand that the Point Arena High School and the Point Arena Joint Union High School District policy regarding the use of illegal drugs will be enforced for any violations of these rules.

\_\_\_\_\_  
Signature of Athlete

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian/Caregiver

\_\_\_\_\_  
Date

**PARTICIPATION AGREEMENT FOR  
CALIFORNIA INTERSCHOLASTIC FEDERATION (CIF)  
VOLUNTARY ACTIVITIES**

**ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK**

I authorize my student, \_\_\_\_\_ to participate in the District sponsored activities of \_\_\_\_\_.

I understand and acknowledge that these activities, by their very nature, pose the potential risk of serious injury/illness to individuals who participate in such activities.

I understand and acknowledge that some of the injuries/illnesses which may result from Participating in these activities include, but are not limited to the following:

- |                              |                          |
|------------------------------|--------------------------|
| 1. Sprains/strains           | 5. Paralysis             |
| 2. Fractured bones           | 6. Loss of eyesight      |
| 3. Unconsciousness           | 7. Communicable diseases |
| 4. Head and/or back injuries | 8. Death                 |

I understand and acknowledge that participation in these activities is completely voluntary And as such is not required by the District for course credit or for completion of graduation requirements.

I understand and acknowledge that in order to participate in these activities. I and my son/daughter agree to assume liability and responsibility for any and all potential risks which may be associated with participation in these activities.

I understand, acknowledge and agree that the District, its employees, officers, agent, or volunteers, shall not be liable for any injury/illness suffered by my son/daughter which is incident to and/or associated with preparing for and/or participating in this activity.

I acknowledge that I have carefully read this PARTICIPATION AGREEMENT FOR CIF VOLUNTARY ACTIVITIES and that I understand and agree to its terms.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

A signed PARTICIPATION AGREEMENT FOR CIF VOLUNTARY ACTIVITIES must be on file with the District before a student will be allowed to participate in the above extracurricular activities.

## **ATHLETIC CODE**

### **PREFACE**

Athletics means more than just competition between individuals or between teams representing different schools. It is a means of learning a way of life truly respected in professions, businesses and in all other occupations. It teaches us understanding and appreciation of teamwork. Athletics exemplifies the philosophy that hard work, drive and determination bring eventual success.

### **ATHLETIC PHILOSOPHY**

The Athletic Department, as a part of the school curriculum, must share the function of education. That function is to help students find individual happiness, to become competent family members, to become constructive citizens in a democracy, and to understand and appreciate the ethical values of a world society.

### **CONDUCT OF ATHLETICS**

The conduct of an athlete is closely observed, and it is important that his/her behavior be above reproach. A good athlete is a leader and, therefore, has certain obligations and responsibilities.

- I. Physical condition – a good athlete:
  - A. Abides by all the training regulations set up by his/her coach.
  - B. Has a sound diet and gets a sufficient amount of sleep.
  - C. Must abide by the school rules/regulations and mandatory random drug testing which pertain to the use of alcohol, tobacco, and illegal drugs, convinced that they are harmful to good physical conditioning, his/her chances of victory, team morale, and that they can bring disastrous results to team spirit and effort.
  - D. If injured, reports injury to coach, then remains on the team roster and continues to abide by all the regulations of this code. Physical limitations permitting, continues to participate in team activities unless he/she has received permission from the coach to do otherwise.
  
- II. On the field – a good athlete:
  - A. Is in complete command of himself/herself at all times.
  - B. Is respectful to all officials.
  - C. Is modest in victory and gracious in defeat.
  - D. Exercises good sportsmanship; is always aware of his/her responsibilities to himself/herself, his/her team, and his/her school.
  - E. Is in control of his/her temper at all times.
  - F. Assumes the responsibility of keeping the school equipment issued to him/her in the best condition. Any loss or damage, as a result of negligence, becomes the obligation of the athlete.
  - G. Never engages in rough-housing, wrestling or shoving, snapping or throwing of towels or equipment in the locker room or showers.
  
- III. In the community and on trips – a good athlete:
  - A. Conducts himself/herself as a worthy representative of his/her family, community, school and team.
  - B. Dresses in accordance with the school athlete dress code.

- C. Travels with his/her team both to and from all contests, except when prior written permission from his/her parents and signed by a school administrator permits him/her to do otherwise.
- D. Maintains mature behavior while en route, thinking of what he/she is going to do at the contest, and on the return trip, thinking of what he/she could have done to improve his/her performance.

IV. At school – a good athlete:

- A. Meets the citizenship standards of his/her school in regular attendance, conduct and personal appearance, realizing that athletics are only part of his/her program in school.
- B. Shows respect for his/her teachers and fellow students.
- C. Does all that he/she can do to promote a feeling of pride in his/her school.
- D. Knows that hazing of students, fights or any form of rough-housing does not promote proper school spirit and is absolutely forbidden.
- E. Never uses profanity or vulgarity.
- F. Never cuts practice or puts himself/herself above the welfare of his/her team and his/her school.

### ATHLETIC ELIGIBILITY

TO BE ELIGIBLE for participation in sports, students must abide by the following rules:

(Scholastic Eligibility Rule 205)

- I. Academic eligibility
  - A. A student, in order to be academically eligible for athletic participation, must be currently enrolled in a minimum of 20 semester periods of work and have passed at least 20 semester periods of work at the completion of the last regular grading period and must be successfully progressing toward the graduation requirements and be maintaining the grade point average as set forth by the local Board of Trustees, which exercises the responsibility over the student's school. A grade point average of 2.0 must be maintained.
  - B. A student's eligibility is determined four times each year. 1<sup>st</sup> Quarter, 1<sup>st</sup> Semester, 3<sup>rd</sup> Quarter and 2<sup>nd</sup> Semester.
  - C. A student in grades 9 through 12 must have earned a minimum of a 2.0 or "C" average, is maintaining minimum progress toward meeting the PAHS graduation requirements, was passing the equivalent of at least 20 semester periods of work during the preceding grading period. A student who falls below the eligibility requirements may be placed on academic probation once during 9<sup>th</sup> through 12<sup>th</sup> grade.
- II. A student must be satisfactory in conduct, habits, tardiness and attendance before representing the school in an athletic contest. (Extenuating circumstances may be reviewed by the coach, athletic director, and/or principal.)
- III. School Attendance Requirement
  - A. A student must be in school at least four (4) periods in order to participate on the day of a contest. An exception would be made if the student had an approved

- medical appointment or other valid excuse. In this case the student must present to the principal a signed statement from the doctor or parent regarding the absence.
- B. If a student is absent the last school day of the week, and the competition is on a non-school day, the student must bring a signed statement to the principal explaining the absence. It is recommended that the coach call the parent regarding the absence.
  - C. To protect student health, no athlete will practice after school if he/she missed any of the last three (3) periods in the school day. Exceptions to this include prior arrangements made with the coach due to family needs, medical appointments, or other valid excuses.
- IV. If absent five (5) days for illness or a serious injury, a doctor's and/or parent's written statement saying student is well enough to resume participation may be required.
  - V. Must meet grade level, age, and residence, as required by the Coastal Mountain Conference, California Interscholastic Federation, and Point Arena High School.
  - VI. All athletes must have proof of a current insurance policy paid and cleared.
  - VII. Physical Examination:
    - A. CIF rules require that ALL students participating in a sport, show evidence of a physical examination given by a licensed California physician prior to participation. Physicals must be taken each and every year and on record with office.
  - VIII. Until a student has shown evidence of a physical examination and "adequate" insurance coverage for the current school year, he/she will not be issued a uniform or allowed to practice.
  - IX. An athlete found destroying or damaging any piece of school property must assume financial liability and can be suspended from athletics.
  - X. An athlete never cuts practice. If he/she must miss practice or a game, he/she should talk with his/her coach prior to the day of practice or game in question.
  - XI. Use or possession of alcoholic beverages, tobacco products, drugs, narcotics, or hallucinating agents by athletes is prohibited. Each athlete must agree to participate in the mandatory random drug testing program delineated in a separate board policy.

A student is NOT eligible if:

- I. He/she will be nineteen years of age by September 1<sup>st</sup>.
- II. He/she has attended high school for more than eight semesters.
- III. He/she was out of school the previous semester.

- IV. He/she has participated on any organized team outside of school while on any school team.

## TRANSPORTATION

- I. Athletes must travel to and from contests in transportation provided by the school. The only exceptions are:
  - A. Injury to a participant which would require alternate transportation.
  - B. Prior arrangement between the participant's parent/guardian and the principal for the student to ride with the parent/guardian or other authorized individual(s).
- II. Funding team transportation and expenses:
  - A. Each participating athlete is strongly encouraged (but not required) to participate in team fundraising to defray transportation costs not covered by the district. Charitable donations to athletic teams are welcomed, and tax receipts will be provided to families and/or business that make donations.
- III. Trips away from Point Arena High School
  - A. All Point Arena High School rules and regulations are applicable to athletes while on a trip.
  - B. When we are visiting another school all players are restricted to the facilities. NO ONE will leave to area unless he/she has checked in with his/her coach for permission.
  - C. All out of state field trips require advanced Board approval.
  - D. All multi-day field trips require advanced administrative approval.
  - E. All field trips that utilize alternative bus service require advanced administrative approval.
  - F. All field trips must have alternative transportation plans incorporated into submitted request.
  - G. Superintendent will notify and confer with respective Board President on the cancellation of any field trip.

## EQUIPMENT

- I. Equipment must be accounted for, except for consumable items. Equipment must be returned by the student not more than five (5) days after the close of the season. If the equipment is not returned at the end of 5 days, the student is to be billed for the equipment.

## DROPPING FROM A TEAM

- I. No athlete may quit one sport and turn out for another after the season has begun without the mutual consent of both coaches.
- II. An athlete dropping from a team without the coach's permission shall not be entitled to receive his/her Block PA.
- III. Coaches have the discretion to award Block PA's to those athletes they feel have contributed in some manner to the overall success of a team.

- IV. Completion of the sports season is required in order for the student to be eligible for Athletic Letter or other team or individual awards. (Exception: injury, which limits participation.) No awards shall be given to any student suspended for the remainder of the season.

## CONCLUSION

Athletes are representatives of the school and the community, and, as such, they are expected to act in accordance with all laws and school regulations both at school and away. The coaching staff and administration of Point Arena High School believe that competition in school athletics is both a privilege and part of the high school curriculum.

In order to build good sportsmanship, respect for rules and authority, leadership, team pride, teamwork, team discipline and eliminate disruptive influences in the locker room, on the playing floor/field, or on trips, we, the staff and administration, encourage development in the following areas:

- I. Positive Attitudes
- II. High Academic Grades
- III. Personal Discipline
- IV. Individual Appearance
- V. Promptness
- VI. Fitness and Injury Free Participation
- VII. Leadership Abilities

THIS CODE EMPHASIZES THE STUDENT ATHLETIC PORTION OF THE INTERSCHOLASTIC SPORTS RULES AND REGULATIONS FOR THE POINT ARENA JOINT UNION HIGH SCHOOL DISTRICT. ANY STUDENT OR PARENT WISHING TO REVIEW THE COMPLETE INTERSCHOLASTIC SPORT RULES AND REGULATIONS SHOULD SEE THE ATHLETIC DIRECTOR, PRINCIPAL OR CIF WEBSITE.

Point Arena High School  
Point Arena Jt. Union High School District

Point Arena, CA 95468  
2024-2025 School Year

Revised 7/18

## 2024-2025 ATHLETIC CODE

Point Arena High School considers cheerleaders, team members, and any other group representing Point Arena High School at athletics or any other school event a part of the activities program and requires that they abide by the Athletic Code.

I understand the Athletic Code and its implications. I also understand that if I fail to uphold the provisions set forth in the Athletic Code my privilege to participate as cheerleader, team member, or with any other group representing Point Arena High School can be revoked.

I am a representative of the school in the same manner as when I attend school. My actions while away from school may be reviewed and could result in suspension from school by the Principal, Superintendent, and/or the School Board of Trustees.

I will assume responsibility for equipment and for damages caused by me and agree to pay for lost equipment and for the damages.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Activity

\_\_\_\_\_  
Student Signature

I have read and understand the provisions set forth in the Athletic Code and support it fully.

\_\_\_\_\_  
Parent Signature

***This form must be completed and returned to the coach who will keep it on file.***



**ATHLETE / COACH  
EJECTION POLICY NOTIFICATION FORM\***

**2024-2025**

**Point Arena High School**

The following rules and minimum penalties are applicable to players as adopted by the NCS Board of Managers on April 21, 1995. This policy will be in effect beginning with the 1995-96 school year, (and will include non-league, league, invitational tournaments/events, post-season; league, section or state playoffs, etc.)

1. Ejection of a player from a contest for unsportsmanlike or dangerous conduct.  
Penalty: The player shall be ineligible for the next contest (non-league, league, invitational tournaments/events, post-season; league, section or state playoffs, etc.)
  
2. Illegal participation in the next contest by a player ejected in a previous contest.  
Penalty: The contest shall be forfeited and the ineligible player shall be ineligible for the next contest.
  
3. Second ejection of a player for unsportsmanlike or dangerous conduct from a contest during one season.  
Penalty: The player shall be ineligible for the remainder of the season.
  
4. When one or more players leave the bench to begin or to participate in an altercation.  
Penalty: The player(s) shall be ejected from the contest in question and become ineligible for the next contest (non-league, league, invitational tournaments/events, post-season; league, section or state playoffs, etc.)

I have read and understand the rules and regulations of the Ejection Policy. Athletes may not participate in any contest until this document is filed with the school.

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Coach's signature

\_\_\_\_\_  
Date

SPORT \_\_\_\_\_

VAR    JV    FS    FR  
(Circle one)

These signed policy statements are to be maintained at each school. An Ejection Policy Notification Form-SCHOOL (see pg. 4) is to be filed, according to league policy, either with the league commissioner or with the North Coast Section.

**“Excellence in Education”  
POINT ARENA JOINT UNION HIGH SCHOOL DISTRICT  
ARENA UNION ELEMENTARY SCHOOL DISTRICT**

**P. O. Box 87  
Point Arena, CA 95468  
707.882.2803 • Fax 707.882.2848**

**Office of the Superintendent**

**PARENT RELEASE FORM**

I take full responsibility for transporting my own student to and from extra-curricular activities. I understand that I cannot take any other students with me without submitting a Private Vehicle Use Form and proof of insurance.

\_\_\_\_\_  
Student Name (please print)

\_\_\_\_\_  
Parent Name (please print)

\_\_\_\_\_  
Date

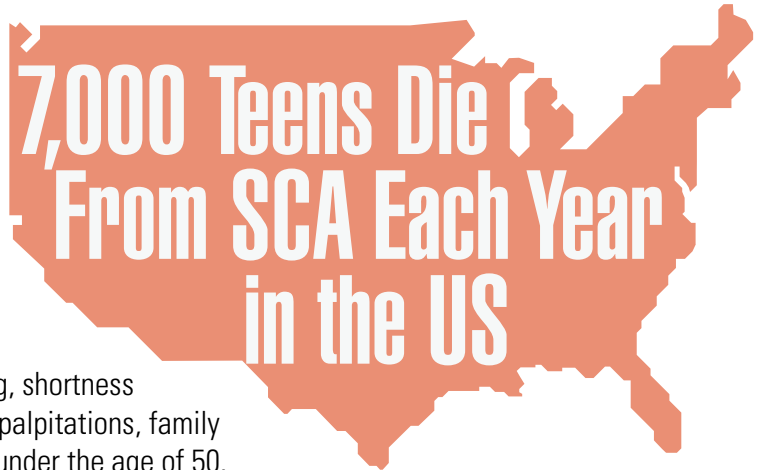
\_\_\_\_\_  
Parent Signature

# SCREEN YOUR TEEN SAVE A LIFE

The EP Save A Life Foundation is committed to preventing SCA in young people through awareness, education and action. Saving lives is paramount to our mission and prevention is our goal.

## What Is Sudden Cardiac Arrest?

Sudden Cardiac Arrest (SCA) is not a heart attack. It's an abnormality in the heart's electrical system that abruptly stops the heartbeat. It's caused by an undetected congenital or genetic heart condition.



## First Symptom May Be Death

Possible Warning Signs: Unexplained fainting, shortness of breath, lightheadedness, chest pain, heart palpitations, family history of SCA or unexplained sudden death under the age of 50.

## 1 in 100 Youth At Risk

SCA is the #2 killer of youth under 25. These youth could've been saved with a simple EKG, but EKGs are not a part of a well-child or pre-sports exam.



## 1 Athlete Dies Every 3 Days

SCA is 60% more likely to occur during exercise or sports activity, so athletes are at greater risk. SCA is also the leading cause of death on school campuses.



## Time Critical

If not properly treated within minutes, SCA is fatal in 92% of cases.



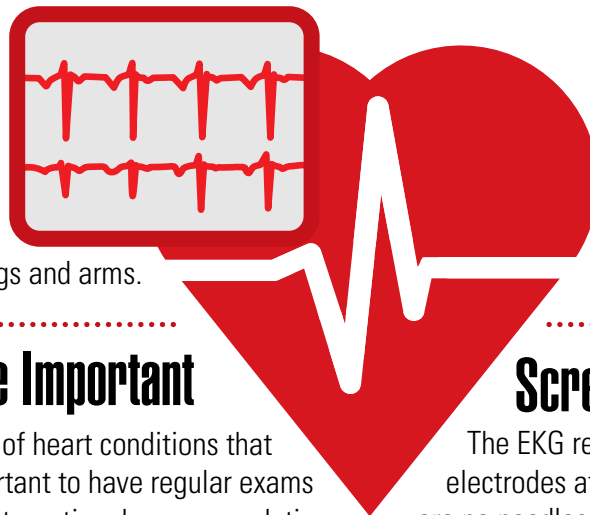
## An Automated External Defibrillator Can Save Lives



An automated external defibrillator (AED) used within the first five minutes is the only way to restore normal heart activity to an SCA victim. The average arrival time for EMTs is six to 12 minutes. We need more AEDs and training so anyone can react quickly.

## What Is An EKG?

An EKG measures your heart rate and electrical activity through electrodes attached via small patches with a mild adhesive to the chest, legs and arms.



## Screening Results

Always follow up with your family doctor and add this baseline EKG to your child's medical chart. If the EKG is abnormal, be sure to see your doctor within two weeks for follow-up testing and treatment.

## Regular Exams Are Important

An EKG can only detect 60% of heart conditions that put teens at risk, so it's important to have regular exams with your family physician. International recommendations are to repeat the EKG every other year through age 25.

## Screenings Are Painless

The EKG reads your heartbeat from electrodes attached to your body. There are no needles or x-ray exposure. It takes just a few minutes and is completely painless.



# Keep Their Heart in the Game

## Sudden Cardiac Arrest Information for Athletes & Parents/Guardians

**What is sudden cardiac arrest?** Sudden cardiac arrest (SCA) is when the heart stops beating, suddenly and unexpectedly. When this happens blood stops flowing to the brain and other vital organs. SCA is NOT a heart attack. A heart attack is caused by a blockage that stops the flow of blood to the heart. SCA is a malfunction in the heart's electrical system, causing the victim to collapse. The malfunction is caused by a congenital or genetic defect in the heart's structure.

### How common is sudden cardiac arrest in the United States?

As the leading cause of death in the U.S., there are more than 300,000 cardiac arrests outside hospitals each year, with nine out of 10 resulting in death. Thousands of sudden cardiac arrests occur among youth each year, as it is the #1 killer of student athletes and the leading cause of death on school campuses.

### Who is at risk for sudden cardiac arrest?

SCA is more likely to occur during exercise or physical activity, so student-athletes are at greater risk. While a heart condition may have no warning signs, studies show that many young people do have symptoms but neglect to tell an adult. This may be because they are embarrassed, they do not want to jeopardize their playing time, they mistakenly think they're out of shape and need to train harder, or they simply ignore the symptoms, assuming they will "just go away." Additionally, some health history factors increase the risk of SCA.

### What should you do if your student-athlete is experiencing symptoms?

We need to let student-athletes know that if they experience any SCA-related symptoms it is crucial to alert an adult and get follow-up care as soon as possible with a physician, surgeon, nurse practitioner or physician assistant. If the athlete has any of the SCA risk factors, these should also be discussed with a doctor to determine if further testing is needed. Wait for your doctor's feedback before returning to play, and alert your coach, trainer and school nurse about any diagnosed conditions.

**FAINTING**  
is the  
**#1 SYMPTOM**  
OF A HEART CONDITION

## Recognize the Signs & Risk Factors

Tell Your Coach and Consult Your Doctor if These Conditions are Present in Your Student-Athlete

### Potential Indicators That SCA May Occur

- Fainting or seizure, especially during or right after exercise
- Fainting repeatedly or with excitement or startle
- Excessive shortness of breath during exercise
- Racing or fluttering heart palpitations or irregular heartbeat
- Repeated dizziness or lightheadedness
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise

### Factors That Increase the Risk of SCA

- Family history of known heart abnormalities or sudden death before age 50
- Specific family history of Long QT Syndrome, Brugada Syndrome, Hypertrophic Cardiomyopathy, or Arrhythmogenic Right Ventricular Dysplasia (ARVD)
- Family members with unexplained fainting, seizures, drowning or near drowning or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs, such as cocaine, inhalants, "recreational" drugs, excessive energy drinks, diet pills or performance-enhancing supplements

## Cardiac Chain of Survival

On average it takes EMS teams up to 12 minutes to arrive to a cardiac emergency. Every minute delayed in attending to a sudden cardiac arrest victim decreases the chance of survival by 10%. Everyone should be prepared to take action in the first minutes of collapse.

### Recognition of Sudden Cardiac Arrest



Victim is collapsed, unresponsive and not breathing, even if gasping, gurgling, exhibiting breathing noises or seizure-like activity.

### Call 9-1-1



Follow emergency dispatcher's instructions. Call any on-site Emergency Responders.

### Hands-Only CPR



Begin CPR immediately. Hands-only CPR involves fast and continual two-inch chest compressions—about 100 per minute.

### Defibrillation



Immediately retrieve and use an automated external defibrillator to restore the heart to its normal rhythm. Follow step-by-step audio instructions from the AED.

### Advanced Care



Designate a bystander to direct EMS to the victim for quick transfer to the hospital.

# Keep Their Heart in the Game

Sudden Cardiac Arrest Information  
for Athletes & Parents/Guardians

## What is an AED?



An automated external defibrillator (AED) is the only way to save a sudden cardiac arrest victim. An AED is a portable, user-friendly device that automatically diagnoses potentially life-threatening heart rhythms and delivers an electric shock to restore normal rhythm. Anyone can operate an AED, regardless of training. Simple audio direction instructs the rescuer when to press a button to deliver the shock, while other AEDs provide an automatic shock if a fatal heart rhythm is detected. A rescuer cannot accidentally hurt a victim with an AED—quick action can only help. AEDs are designed to only shock victims whose hearts need to be restored to a healthy rhythm. Check with your school for locations of on-campus AEDs.

## What are we doing to help protect student athletes?

The State of California passed the Eric Paredes Sudden Cardiac Arrest Prevention Act in 2016 to protect K-12 students participating in school-sponsored athletic activities. New policy adds sudden cardiac arrest (SCA) training to coach certification, and new protocol that empowers coaches to remove from play a student-athlete who exhibits fainting—the number one warning sign of a potential heart condition, and potentially for other conditions if they are believed to be cardiac related. A student-athlete who has been removed from play after displaying signs or symptoms associated with SCA may not return to play until he or she is evaluated and cleared by a licensed health care provider. Parents, guardians, caregivers and adults involved in athletic activities are urged to dialogue with student-athletes about potential warning signs and risk factors and be familiar with the cardiac chain of survival so they are prepared in the event of a cardiac emergency.

I have reviewed and understand the symptoms and warning signs of SCA and the new protocol to incorporate SCA prevention strategies into my/my student's sports program or activity.

STUDENT-ATHLETE SIGNATURE

PRINT STUDENT-ATHLETE'S NAME

DATE

PARENT/GUARDIAN SIGNATURE

PRINT PARENT/GUARDIAN'S NAME

DATE

## For more information about Sudden Cardiac Arrest visit

California Department  
of Education  
[cde.ca.gov](http://cde.ca.gov)

Eric Paredes Save  
A Life Foundation  
[epsavealife.org](http://epsavealife.org)

California Interscholastic  
Federation (CIF)  
[cifstate.org](http://cifstate.org)

National Federation of High Schools Free  
20-Min. Training Video For Coaches, Parents or  
Anyone Involved in Student Sports Activities  
[nfhslearn.com/courses/61032](http://nfhslearn.com/courses/61032)



## Parent/Guardian and Pupil Sudden Cardiac Arrest Warning Signs and Symptoms Information and Acknowledgment Form

On July 1, 2017, Assembly Bill 1639, known as the Eric Paredes Sudden Cardiac Arrest (SCA) Prevention Act went into effect. This requires the pupil and their parent or guardian to read, sign, and return an SCA form of acknowledgement before the pupil participates in any athletic activity. Districts may use this form, a form located on the California Interscholastic Association (CIF) website, or design their own form. An SCA acknowledgment form must be signed and returned to the school site each school year.

### What Is SCA?

SCA occurs suddenly and often without warning. It is triggered by an electrical malfunction in the heart that causes an irregular heartbeat. With the heart's pumping action disrupted, the heart cannot pump blood to the brain, lungs, and other organs. Seconds later, a person loses consciousness and has no pulse. Death occurs within minutes if the victim does not receive treatment.

### Who Is at Risk for SCA?

Thousands of sudden cardiac arrests occur among youth each year, as it contributes to the #2 medical cause of death of youth under the age of 25 and is the #1 cause of death of student athletes during exercise. While a heart condition may have no warning signs, studies show that many young people do have warning signs or symptoms but neglect to tell an adult. This may be because they are embarrassed, they do not want to jeopardize their playing time, they mistakenly think that they are out of shape and need to train harder, or they simply ignore the symptoms, hoping the signs will go away.

### Possible Warning Signs and Risk Factors

- Fainting or seizure, especially during or right after exercise
- Fainting repeatedly or with excitement or startle
- Excessive shortness of breath during exercise
- Racing or fluttering heart palpitations or irregular heartbeat
- Repeated dizziness or lightheadedness
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise
- Family history of sudden death or heart disease under age 50
- Use of high-caffeine supplements, energy drinks, diet pills, and drugs

### Removal from Activity

A pupil who faints during or following participation in an athletic activity must be removed from play and may not return to play until they are evaluated and cleared by a physician and surgeon, nurse practitioner or physician's assistant. I have reviewed and understand the symptoms, warning signs, and risk factors associated with SCA.

---

 Print Student/Athlete Name

---

 Signature Student/Athlete

---

 Date

---

 Print Parent/Guardian Name

---

 Signature Parent/Guardian

---

 Date

The CDE used information from the following sources: American Heart Association, Parent Heart Watch (<https://parentheartwatch.org/>), Eric Paredes Save a Life Foundation: Keep Their Heart in the Game (<https://epsavealife.org/>), and Sudden Cardiac Arrest Foundation (<http://www.sca-aware.org/>).

2024-2025

# Student Accident & Sickness Insurance

Re: Student Injuries and Insurance  
2024-2025 School Year

Dear Parent/Legal Guardian:

The safety of our students is of critical importance to all of us and we want to protect them from injury. Even so, accidents do happen (at school and elsewhere) and required medical care can be expensive. Please know that your school **does not** assume responsibility for such costs, but does offer you access to student accident insurance plans for voluntary purchase. Details can be found in the attached brochure/enrollment form.

Options are available to cover your child 24/7, anywhere in the world or you can limit coverage to school-related injuries only. The plans do not restrict your choice of doctors or hospitals. However, you'll also have access to an extensive network of providers with discounted fees. Seeking care through contracted providers may further reduce your out-of-pocket costs, particularly if your child needs surgery or hospitalization.

Also offered is the pay-as-you-go *Student Accident & Sickness Plan* which covers sickness as well as injury, in and out of school. The *Dental Accident Plan* can be of particular value with younger students as final treatment to injured teeth often needs to be deferred until after they mature.

**Common emergency benefits** – Regardless of the benefit level selected, all of the accident medical plans and the *Student Accident & Sickness Plan* will cover eligible charges for *Ambulance, Emergency Room and Emergency Room Physician* at 100% of Usual, Customary and Reasonable charges (UCR) up to plan limits.

**Enhanced benefits for qualified concussions** – If an insured student suffers a concussion while participating in any covered activity and is consequently removed from play from his/her interscholastic sport per the school's formal concussion protocols, then any deductible or inside limit features of the plan are waived and eligible charges for the evaluation and treatment of the concussion are paid at 100% of UCR subject to remaining policy terms and conditions.

**Interscholastic Sports** – Please know that all plans offered (other than the Dental Accident Plan) may be used to comply with applicable state and local insurance requirements for participation in interscholastic sports (coverage for high school tackle football is offered on a stand-alone basis).

You are strongly encouraged to carefully review the information provided. If your child already has health coverage, the student insurance plans offered can also be used to expand your choice of providers and help cover the high deductibles and 30% to 40% cost sharing obligations imposed by many health plans today.

To enroll, please visit [www.myers-stevens.com](http://www.myers-stevens.com); instructions for enrollment are available on the website. While your child is eligible to enroll at any time, one-time-pay rates for the accident medical plans and Dental Accident Plan are the same regardless of enrollment date. As such, you are encouraged to consider enrollment now in order to include coverage for this summer and the full 2023-2024 School Year. Once processing is completed, an ID card verifying coverage will be mailed home to you.

If you have any questions concerning the coverages available or need help with enrollment, please call Myers-Stevens & Toohey at (800) 827-4695. Bilingual representatives are available for parents who need assistance in Spanish.

Sincerely,

Point Arena High School/ Point Arena Schools District  
Shasta Rasmussen  
Administrative Assistant II

Enroll online at

[www.myers-stevens.com](http://www.myers-stevens.com)



Arranged and Administered by

 **myers | stevens | toohey**

718VOL\_Sch\_MB  
12/1/23