

# Sports Reading Info Packet - For 5<sup>th</sup> – 12<sup>th</sup> grade students

After-school sports offered	<b>Fall: 5<sup>th</sup>-12<sup>th</sup> grade soccer</b> <b>Winter: 5<sup>th</sup>-12<sup>th</sup> grade basketball; 9<sup>th</sup>-12<sup>th</sup> grade cheerleading</b> <b>Spring: 9<sup>th</sup>-12<sup>th</sup> grade baseball and softball</b>
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Most of our after-school, interscholastic, sports activities require a commitment of after-school hours for four days a week during the season for that sport. Days involved are Monday, Tuesday, Thursday, and Friday. If there isn't a game scheduled, then a practice session often is then scheduled.

During the school year, information on the athletic schedule for the season will be emailed to the family.

*Please note – Home school students who wish to play an after-school sport will need to pay a \$150 sports fee.*

If your child, enrolling in 5<sup>th</sup> through 12<sup>th</sup> grades, desires to play an after-school sport, a special sports physical form is required by the State of New Jersey. The Annual Athletic Pre-Participation Physical Examination (PPE) form must be received in its entirety in order for a student to be able to participate in either the sport or in its pre-season training. The physical form is good for one year. If the physical (good for one year) expires during the season, the student will be required to stop the sport until a new physical is completed.

Although a concussion baseline testing is not mandatory, it is encouraged by our school nurse, should a head injury occur. If you decide to have your child obtain one and your doctor is not equipped to complete this test as part of the physical, individual appointments can be made at Cooper Bone and Joint, 900 Centennial Boulevard, Building 2 Suite 203 Voorhees. (856.673.4914)

## **In addition to the sports physical, NJ requires athletes and parents to read the following information:**

Sudden Cardiac Death in Young Athletes Pamphlet:

<http://www.state.nj.us/education/students/safety/health/services/cardiac.pdf>

Concussion Policy Acknowledgment Form:

[www.state.nj.us/education/aps/cccs/chpe/concussions/fact.pdf](http://www.state.nj.us/education/aps/cccs/chpe/concussions/fact.pdf)

Sports-related Eye Injuries: An educational Fact Sheet for Parents:

<http://www.state.nj.us/education/students/safety/health/SportsRelatedEyeInjury.pdf>

Opioid Use and Misuse Educational Fact Sheet

<https://www.state.nj.us/education/students/safety/behavior/atd/opioid/FactSheet.pdf>

To confirm that the athlete and parent have read the material, they both must sign the parental Sign-off sheet.

**State of New Jersey**  
**Department of Educational Parental Sign off Sheet**

School: Baptist Regional School

\_\_\_\_\_ We acknowledge that we have received and reviewed the **Sudden Cardiac Death in Athletes Pamphlet**

\_\_\_\_\_ We acknowledge that we have received and reviewed the **Concussion Policy Pamphlet**

\_\_\_\_\_ We acknowledge that we have received and reviewed the **Eye Safety For Athletes Pamphlet**

\_\_\_\_\_ We acknowledge that we have received and reviewed the **Opioid Use and Misuse Educational Fact Sheet**

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

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

Parent/Guardian Signature: \_\_\_\_\_

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

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

**Please return form to coach.**