INTRODUCTION

Participation in athletics in the Camas School District is a PRIVILEGE that involves TEAMWORK and SELF DISCIPLINE. Athletics is an excellent means of bringing together home, school and community, as well as contributing to your personal development, growth and education. The interscholastic athletic program also provides you the opportunity to compete in athletic contests with other schools, aids you in developing new friendships and teaches you good sportsmanship.

If you decide to participate, be prepared to dedicate yourself to the athletic program. Remember, you will be a representative of your family, school and community, so your actions should be above reproach, both at and away from the athletic site. Some sports require the selection of team members. This selection is not always based entirely on athletic ability. Attitude, conduct, cooperation, loyalty and desire are also some characteristics that are considered in selecting team members.

The material in this handbook pertains to all student athletes in the Camas School District.

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AFTER READING THIS HANDBOOK, DETACH THE ATHLETIC REGISTRATION, FILL IN ALL OF THE REQUESTED INFORMATION, OBTAIN ALL SIGNATURES AS INDICATED AND RETURN THE COMPLETED FORM TO YOUR SCHOOL ATHLETIC COORDINATOR PRIOR TO YOUR FIRST PRACTICE.
ATHLETIC CODE FOR CAMAS SCHOOL DISTRICT
REVISED 6/3/08

SECTION I
Being an athlete is a PRIVILEGE that involves teamwork and SELF DISCIPLINE. Parents and coaches, along with athletes themselves, compose that team. In order to have a successful team, certain regulations must be identified and understood by everyone. The Camas School District Athletic Code exists in order to provide specific guidelines to be followed by students who represent their various schools in the field of athletics. These regulations are the product of the parents, students, coaches, school directors and administrators from the Camas School District. All members of a team bear the responsibility for working together to help make athletics a successful experience for everyone involved. Therefore this code shall be in effect 365 days a year, 24 hours a day. It will include those written rules and regulations established for students competing as representatives of the Camas School District. All students choosing to participate in athletic programs shall be given a copy of this code, and by virtue of their continued voluntary participation, shall agree to conduct themselves in accordance with the code.

A student athlete in the Camas School District shall not use, consume, or possess alcoholic beverages, cigarettes, or tobacco of any form, steroids, illegal drugs, including marijuana, or paraphernalia related to the use of illegal drugs and the abuse of prescription or nonprescription drugs. The athlete shall further abide by all written training rules established for the sport in which he/she is competing, and shall at all times behave in a manner that conveys respect for all individuals. Acts of harassment or hazing will not be tolerated (See student handbook for definitions). In addition, a student athlete shall at all times and in all situations, both as a participant and as a spectator, conduct him/herself with personal integrity and honesty. Any action or behavior that necessitates the imposition of team or school discipline or the committing of criminal acts outside of school will be viewed as a violation of the Athletic Code.

(I) TOBACCO - ALCOHOLIC BEVERAGES - DRUGS - DRUG PARAPHERNALIA - STEROIDS
The use of tobacco products, alcohol, legend drugs (including anabolic steroids), controlled substances and controlled substance analogs is prohibited. Any athlete possessing, selling, and/or using tobacco products, alcoholic beverages, legend drugs, (including anabolic steroids) controlled substances or controlled substance analogs, or drug paraphernalia during the athletic school year (see VIII C below) shall be subject to the following disciplinary action.

1) First Violation:
   a) In season - The athlete will be suspended for no less than the remainder of the present sports season or up to sixty (60) school days. This penalty may carry over to the subsequent sports seasons.
   b) Out of season - The athlete will be placed on probation for a minimum of fifteen (15) school days during the next completed sports season in which the athlete participates; also, the athlete will miss the first interscholastic contest to follow his probation if no interscholastic contest should fall within the probation period.

2) Second Violation, whether in season or out of season, will result in suspension from all sports in the Camas School District for one calendar year (365 consecutive days) from the date of the second violation.

3) Third Violation, again whether in season or out of season, will result in permanent ineligibility for interscholastic competition in the Camas School District.

(II) THEFT OR POSSESSION OF STOLEN PROPERTY - HAZING/HARASSMENT - CRIMINAL ACTS

1) First Violation:
   a) In season - The athlete will be suspended for no less than the remainder of the present sports season or up to sixty (60) school days. This penalty may carry over to subsequent sports seasons.
   b) Out of season - The athlete will be placed on probation for a minimum of fifteen (15) school days during the next completed sports season in which the athlete participates; also, the athlete will miss the first interscholastic contest to follow this probation if no interscholastic contest should fall within the probation period.

2) Subsequent suspensions may result in suspension from all sports in the Camas School District for one calendar year (365 consecutive days) from the date of the violation.

(III) SCHOOL DISCIPLINE/SUSPENSION
Any athlete involved in conduct which results in the imposition of disciplinary action other than school suspension may be declared ineligible for the next interscholastic contest for which he/she is eligible. If an athlete is suspended from school for disciplinary reasons for any length of time, the athlete will be placed on probation for up to a maximum of sixty (60) school days and miss at least the first contest following the suspension. Subsequent suspensions may result in suspension from all sports in the Camas School District for up to one calendar year (365 consecutive days).

(IV) COACHES RULES
An athlete will abide by specific written rules formulated by the coach who has the responsibility for an athlete who violated those rules.

(V) TRANSFER STUDENTS
Athletic suspensions or probations which have been imposed by other school districts on students transferring into the Camas School District will be honored.

(VI) AWARDS
If an athlete is on suspension at the conclusion of a sports season, the head coach may forfeit the athlete’s privilege of earning a school letter, certificate or any other school athletic award.

(VII) DEFINITIONS
A) Probation - This is a trial period during which an athlete remains part of the team. The athlete attempts to correct his/her deficiencies within a prescribed time. The athlete will not be able to participate in contests involving other schools during this time.
B) Suspension - An action that denies an athlete participation in athletics for a period of time. In cases where an athletic suspension carries over into his/her next sports season, it reverts to a probationary period provided the athlete completes that entire sports season.
C) In Season - Begins with the first WIAA allowed practice day and ends with the awards ceremony for that sport.
D) Out of Season: Any time not ‘in season.’

(VIII) PROCEDURES FOR DISCIPLINARY ACTION
A) Disciplinary offenses are cumulative during middle school participation as well as senior high participation, but will not be cumulative from middle school participation to senior high participation. Students under athletic sanction at the end of middle school must complete the required disciplinary action.
B) The athletic director/coordinator shall determine disciplinary action resulting from a violation of Camas School District athletic rules within three (3) school days of learning of the violation. The District Athletic Director shall be notified.
C) For first violations of the tobacco, alcoholic beverages, drugs, steroids rules athletes have the option available to participate in and complete a school approved drug/alcohol/tobacco assessment program. Participation in this assessment option will not preclude a minimum athletic suspension period of fifteen (15) school days that must be completed before participation resumes. In addition, athletes who voluntarily come forth seeking help for substance use problems may be granted immunity from disciplinary sanctions under the athletic code if they go through an assessment and enter a rehabilitation program.
D) Athletes and parents will be notified of reasons for and types of disciplinary actions. A grievance procedure, as described in the Student Athletic Handbook will be followed for any athlete excluded from a sport, if so requested in writing to the building principal or designee within
five (5) school business days.

SECTION II  Student Standards for Athletic Eligibility
(Eligibility requirements are established in accordance with Article 18.0.0 of the Washington Interscholastic Activities Handbook.)

A. **SCHOLARSHIP**
   In order to maintain athletic eligibility during the current semester, the student athlete shall maintain a 2.0 GPA and passing grades in a minimum of five classes in which they are enrolled during the grading period immediately prior to the activity or season, i.e. you cannot fail more than one class. (Block classes are considered separately, e.g. humanities = 2 classes.) Those who do not meet this requirement will be placed on academic probation:
   1. Student athletes will be declared ineligible until a progress report indicates that he/she is meeting the minimum standard. For fall semester progress reports will be assessed on the thirteenth (13th) day of school.
   2. Student athletes will be expected to attend an after school conference period for a minimum of three weeks.
   3. Student athletes will continue to turn in weekly progress reports until no longer directed to do so.
   4. Student athletes placed on academic probation will not be eligible to participate in at least one regular season athletic event. Participants are allowed to practice during the ineligible period of time. Participants who are put on academic probation for any two consecutive grading periods or more than two grading periods in a school year will be suspended for 20% of the current or upcoming activity season. They will need to meet all the requirements of academic probation during the suspension period.

B. **AGE LIMITS**
   **Senior High** - The student(s) shall be under 20 years of age on September 1 for fall sports season, on December 1 for the winter sports season, and on March 1 for the spring sports season.

   **Middle School** - The student(s) shall not have reached his/her 16th birthday prior to June 1 of the previous year.

C. **ATHLETIC REGISTRATION/PHYSICAL EXAMINATION**
   An athletic emergency form and a current physical must be on file for each student participating in any sport before he/she turns out or is allowed to participate.

   **PHYSICAL EXAMINATION**
   The Washington Interscholastic Activities Association requires (Regulation 18.13) that prior to the first practice for participation in interscholastic athletics a student shall undergo a thorough medical examination and be approved for middle level and/or high school interscholastic athletic competition by a medical authority licensed to perform a physical examination. Those licensed to perform physical examinations (Regulation 18.13.1) include Medical Doctors, Doctors of Osteopathy, Advanced Registered Nurse Practitioner, Physicians Assistants and Naturopathic Physicians.

   Physicals are valid for 24 months from the date of the examination. Physicals expiring during a season need to be renewed prior to the expiration date to continue in the program.

To resume participation following an illness and/or injury serious enough to require medical care a participating student must present to the school officials a written release from a physician licensed to perform physical examinations as listed in 18.13.1 and/or a dentist as applicable.

D. **INSURANCE**
   It must be indicated on the Parent Permission -Emergency Medical Form that is kept on file with the athletic director that participants are covered by accident insurance during the current season. Insurance is available through the athletic office for students who wish to purchase it. This information will be collected every year even though the physical form may be valid for two years.
E. **A.S.B. CARD**
All athletics are supported by Associated Student Body funds. Team members are required to purchase ASB cards to help fund the cost associated with the various sports.

F. **SUMMER SPORTS CAMPS**
(1) For high schools summer is defined as the first day following the WIAA spring tournaments through July 31. A school athlete’s participation in a commercial summer camp, school sponsored summer camp, summer clinic or other similar program in any sport shall not begin until the conclusion of the final WIAA State Tournament of the school year. For middle level schools summer is defined as the first day following the final day of the spring sports schedules through July 31.

(2) Participants in a school sponsored fall sport cannot attend any camps or clinics in that sport after August 1st if the participant’s coach is a clinician/organizer of that camp/clinic. (Refer to 17.8.0 in WIAA Handbook).

**SECTION III Camas School District Attendance Policy**
Any student participating in an activity shall be expected to attend and participate in all classes on the day of the scheduled activity. On any school day students must be in attendance all day to participate in practice. In the case of weekday scheduled activities, attendance in all classes the following day is also expected. In the cases of weekend scheduled activities, attendance in all classes the previous Friday is also expected. Failure to comply with these attendance regulations will result in a student being declared ineligible and not allowed to participate in the next scheduled activity. Exceptions to this rule may be made by the building principal or designee.

**SECTION IV School Issued Equipment**
A. School equipment checked out by the student athlete is his/her responsibility. He/she is expected to keep it clean and in good condition.

B. Loss of issued equipment or damage to issued equipment will be the student’s financial obligation.

C. Issued equipment is to be used only while participating with the team in practice or during a contest. If coaches desire players may wear their jerseys to school on game days. However, they are not to be worn at other times without their coach’s prior permission.

D. School uniforms imply school sponsorship and may be worn only during the WIAA season for that sport.

**SECTION V - Travel**
A. In District transportation will not be provided for evening high school or middle school athletic contests/practices.

B. In all other cases, all athletes must travel to and from athletic contests in transportation provided by the school district. Except that an athlete may return:
   (1) With his/her own parent(s) if parent meets the coach in person after the contest and requests to take his/her athlete (only) home in their own car.
   (2) In a private car, if the parent sends a written request to the athletic director prior to departure and the athletic director gives approval to the coach in charge.
   (3) Individual school administration may develop more specific student-athlete transportation policies.

C. Athletes will remain with their squad and under the supervision of their coach when attending away contests.

D. Visiting athletes are direct representatives of their school, community and home and should conduct themselves accordingly.
SECTION VI Amateur Standing
A. An amateur student athlete is one who engages in athletics for the physical, mental, social and educational benefits he/she derives there from, and to whom athletics is an avocation and not a source of financial reward. In order to maintain his/her amateur standing, he/she may not:
   (1) Accept merchandise or in kind gifts of more than $300 in value, excluding reduced membership or user fees for athletic clubs, recreation centers, golf courses, etc.
   (2) Accept cash awards.
   (3) Enter competition under a false name.
   (4) Accept payment of expense allowances over the actual and necessary expenses for the athletic trip.
   (5) Sign or have ever signed a contract to play professional athletics (whether for a money consideration or not); play or have ever played on any professional team in any sport; receive or have ever received, directly or indirectly, a salary or any other form of financial assistance (including scholarships or educational grants) from a professional sports organization or any of his/her expenses for reporting to or visiting a professional team.

B. STUDENT AS AN INSTRUCTOR, SUPERVISOR OR OFFICIAL
Instructing, supervising or officiating in (paid or non-paid) organized youth sports program, recreation, playground or camp activities will not jeopardize amateur standing.

SECTION VII- Grievance Procedure to Athletic Suspension
Step I
Athletes and/or parents may request a grievance hearing if done so in writing to the District Athletic Director within five (5) school days.

Step 2
The District Athletic Director will review all of the materials provided to determine if the imposed discipline is fair, consistent and equitable, and render a decision within three (3) school days.

Step 3
Athletes and/or parents may appeal the District Athletic Director’s decision in writing within five (5) working days to the Building Principal. The Building Principal shall have ten (10) school days to render a written decision.
**SECTION VIII**

**CAMAS PUBLIC SCHOOLS**

**PARTICIPATION HISTORY**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>HISTORY</th>
</tr>
</thead>
</table>

1. a. ______  ______  Have you had any illness recently, or do you have an illness/injury now?
b. ______  ______  Have you had a medical problem, illness or injury since your last exam?
c. ______  ______  Do you have any chronic or recurrent illness?
d. ______  ______  Have you ever had any illness lasting more than a week?
e. ______  ______  Have you ever been hospitalized overnight?
f. ______  ______  Have you ever had surgery other than a tonsillectomy?

2. ______  ______  Are you presently taking ANY medication (including birth control pills, vitamins, aspirin, etc.)?

3. ______  ______  Do you have ANY allergies (medicines, bees, foods or other factors)?

4. a. ______  ______  Have you ever had chest pain, dizziness, fainting, passing out during or after exercise?
b. ______  ______  Do you tire more easily or quickly than your friends during exercise?
c. ______  ______  Have you ever had any problem with your blood pressure or your heart?
d. ______  ______  Have any close relatives had heart problems, a heart attack or sudden death before they were age 50?

5. ______  ______  Do you have any skin problems (acne, itching, rashes)?

6. a. ______  ______  Have you ever had fainting, convulsions, seizures or severe dizziness?
b. ______  ______  Do you have frequent severe headaches?
c. ______  ______  Have you ever had “stinger” or “burner” or “pinched nerve”?
d. ______  ______  Have you ever been “knocked out” or “passed out”?
e. ______  ______  Have you ever had a neck or head injury?

7. ______  ______  Have you ever had asthma, or trouble breathing, or cough during or after exercise?

8. a. ______  ______  Do you wear eyeglasses, contact lenses or protective eye wear?
b. ______  ______  Have you ever had any problem with your eyes or vision?

9. ______  ______  Do you wear any dental appliance such as braces, a bridge, plate, retainer?

10. a. ______  ______  Have you ever had a knee injury?
b. ______  ______  Have you ever had an ankle injury?
c. ______  ______  Have you ever injured any other joint (shoulder, wrist, fingers, etc.)?
d. ______  ______  Have you ever had a broken bone (fracture)?
e. ______  ______  Have you ever had a cast, splint, or had to use crutches?
f. ______  ______  Must you use special equipment for competition (pads, neck braces, neck roll, etc.)?

11. ______  ______  Has it been more than 5 years since your last tetanus booster shot?

12. ______  ______  Are you worried about your weight?

13. ______  ______  FEMALES: Have you had any menstrual problems?

14. ______  ______  Do you have any medical concerns about participating in your sport?

**---- ATHLETE SHOULD NOT WRITE BELOW THIS LINE****

**EXAMINER’S COMMENTS ON ALL “YES” ANSWERS (refer to question number):**

**EXAMINER’S NOTE:**

☐ Please Note: Per WIAA Regulation this examination is good for 2 years, unless otherwise instructed

☐ This examination is for participation at the middle school level (grades 6-8)

☐ This examination is for participation at the senior high school level (grades 9-12)
### PHYSICAL EXAMINATION

Name: __________________________________________

AGE: _______  HEIGHT: _______  WEIGHT: _______

BLOOD PRESSURE: ______  PULSE: ______  VISUAL ACUITY: L _______  R _______

<table>
<thead>
<tr>
<th>Normal</th>
<th>Abnormal</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) _______</td>
<td>Head</td>
</tr>
<tr>
<td>(2) _______</td>
<td>Eyes (pupils), ENT</td>
</tr>
<tr>
<td>(3) _______</td>
<td>Teeth</td>
</tr>
<tr>
<td>(4) _______</td>
<td>Chest</td>
</tr>
<tr>
<td>(5) _______</td>
<td>Lungs</td>
</tr>
<tr>
<td>(6) _______</td>
<td>Heart</td>
</tr>
<tr>
<td>(7) _______</td>
<td>Abdomen</td>
</tr>
<tr>
<td>(8) _______</td>
<td>Genitalia</td>
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<tr>
<td>(9) _______</td>
<td>Neurologic</td>
</tr>
<tr>
<td>(10) _______</td>
<td>Skin</td>
</tr>
<tr>
<td>(11) _______</td>
<td>Physical Maturity</td>
</tr>
<tr>
<td>(12) _______</td>
<td>Spine, Back</td>
</tr>
<tr>
<td>(13) _______</td>
<td>Shoulders, Upper Extremities</td>
</tr>
<tr>
<td>(14) _______</td>
<td>Lower Extremities</td>
</tr>
</tbody>
</table>

NO RESTRICTIONS _______

PARTICIPATION RESTRICTED (LIST REASONS):

RECOMMENDATIONS (EQUIPMENT, TAPING, REHABILITATION, ETC):

DATE: ______________  EXAMINER’S SIGNATURE: ____________________________

EXAMINER’S PHONE: _______  PRINT EXAMINER’S NAME: ____________________________
SECTION X
CAMAS HIGH SCHOOL
ATHLETIC AND MEDICAL EMERGENCY AUTHORIZATION FORM

Check the box next to the sport you are playing each season. Please put an “M” after the sport if you are going to be a manager. Return this form to the Athletic Office at Camas High School.

<table>
<thead>
<tr>
<th>FALL</th>
<th>WINTER</th>
<th>SPRING</th>
</tr>
</thead>
<tbody>
<tr>
<td>football</td>
<td>Boys Basketball</td>
<td>Baseball</td>
</tr>
<tr>
<td>Cross Country</td>
<td>Girls Basketball</td>
<td>Softball</td>
</tr>
<tr>
<td>Boys Golf</td>
<td>Wrestling</td>
<td>Boys Soccer</td>
</tr>
<tr>
<td>Girls Soccer</td>
<td>Boys’ Swim</td>
<td>Girls Golf</td>
</tr>
<tr>
<td>Volleyball</td>
<td>Gymnastics</td>
<td>Girls Tennis</td>
</tr>
<tr>
<td>Girls Swim</td>
<td>Competitive Dance</td>
<td>Track</td>
</tr>
<tr>
<td>Boys Tennis</td>
<td>Basketball Cheer</td>
<td></td>
</tr>
<tr>
<td>Football Cheer</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Name of Student________________________________________________________________

Last   First  Middle Initial      Grade

☐ Full Time CHS Student  ☐ Private School Student  ☐ Home Schooled Student*

*If you are home school you must show that you are registered with the Camas District Office.

Parent’s Name__________________________________________________________________

Address_______________________________________________________________________

Home Phone________________ Work Phone________________ Cell Phone_______________

Emergency phone other than parent: (Neighbor, Relative, Friend, etc)

Name: ____________________________ Relationship: _______________Phone____________

Name: ____________________________ Relationship: _______________Phone____________

Health and Dental Insurance is Required for participation in athletics

Health Insurance Provider ________________________________ Policy No._______________

Does your health provider cover dental accidents? __________yes _____________no

Emergency Dental Provider (If not covered by medical)

_____________________________________________________ Policy No. _______________

As parent or legal guardian, I authorize the team physician or, in his absence, a qualified physician to examine the above-named student in the event of injury. I also give permission to administer emergency care and to arrange for any consultation by a specialist, including a surgeon if deemed necessary, to insure proper care of any injury. Every effort will be made to contact a parent or guardian to explain the nature of the problem prior to any involved treatment.

I have also read the Athletic Code of Conduct and agree that my son/daughter must follow the guidelines set forth.

Parent/Guardian Signature: ___________________________________ Date _______________

I have read the Athletic Code of Conduct and agree to follow the guidelines set forth.

Student Signature___________________________________________ Date ______________
LIBERTY/SKYRIDGE MIDDLE SCHOOL
CAMAS SCHOOL DISTRICT
ATHLETIC FORM AND MEDICAL EMERGENCY AUTHORIZATION FORM

Circle which sport you are playing each season. You may choose one from each season. Please put an “M” after the sport if you are a manager.

1st Season 7/8 Football 6/7/8 Wrestling
7/8 Volleyball 7/8 Girls’ Basketball

2nd Season 6/7/8 Wrestling

3rd Season 6/7/8 Girls’ Gymnastics
7/8 Boys’ Basketball
6/7/8 Knowledge Bowl

4th Season 6/7/8 Track

□Full Time Liberty Student □Private School Student □Home School Student*
*If you are home school you must show that you are registered with the Camas District Office

Name of Student________________________________________________________________
Last  First  Middle Initial  Grade

Parent’s Name__________________________________________________________________

Address_______________________________________________________________________

Home Phone____________ Work Phone____________ Emergency Phone____________

Emergency phone other than parent: (Neighbor, Relative, Friend, etc)

Name: ____________________________ Relationship: _______________ Phone____________

Name: ____________________________ Relationship: _______________ Phone____________

Health and Dental Insurance is Required by the WIAA for participation in athletics

Health Insurance Provider ________________________________ Policy No._______________

Does your health provider cover dental accidents? __________yes _____________no

Emergency Dental Provider (If not covered by medical)

_____________________________________________________ Policy No. _______________

As parent or legal guardian, I authorize the team physician or, in his absence, a qualified physician, to examine the above-named student in the event of injury. I also give permission to administer emergency care and to arrange for any consultation by a specialist, including a surgeon if deemed necessary, to insure proper care of any injury. Every effort will be made to contact a parent or guardian to explain the nature of the problem prior to any involved treatment.

Parent/Guardian Signature:___________________________________ Date _______________

I have read the Athletic Code of Conduct and agree to follow the guidelines set forth.

Student Signature___________________________________________ Date _______________

Parent Signature  _________________________________________ Date _______________
ATHLETIC ELIGIBILITY FORM

ATHLETIC ELIGIBILITY
Please answer the following questions pertaining to athletic eligibility. It is extremely important to give accurate information. A participant/parent/guardian who provides the school with false information may result in the participant being declared ineligible from interscholastic competition for a period of one year.

Name: ________________________________________________________________

Student Athlete

____ yes  ____ no  The above student is under 20 years of age (high school) or 16 years of age (middle school).

____ yes  ____ no  The above student resides within the boundaries of the Camas school he/she attends.

____ yes  ____ no  The above student resides with his/her parents/legal guardians and has one so for the last calendar year.

____ yes  ____ no  The above student attended school the previous semester

____ yes  ____ no  The above student passed at least 5 full credit classes the previous semester (in a six period day).

____ yes  ____ no  The above student is presently enrolled in the Camas School District with a minimum of 5 full credit classes.

____ Yes  ____ No  Student is in Running Start?

____ Yes  ____ No  Student is a registered home school student?

____ Yes  ____ No  Four years have not elapsed since the student entered high school.

School attended last year:__________________________ from (month/year) _____ / ____ to ____ / ____

Student Signature:__________________________________________________________ Date: __________

Parent Signature:__________________________________________________________ Date: __________