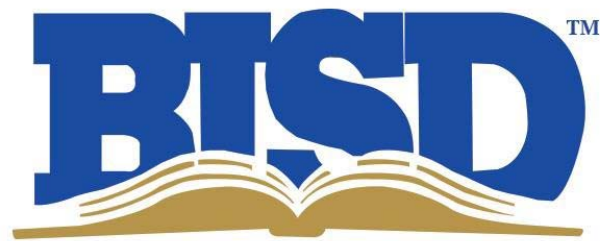


BIRDVILLE INDEPENDENT SCHOOL
DISTRICT



ATHLETICS

MIDDLE SCHOOL HANDBOOK



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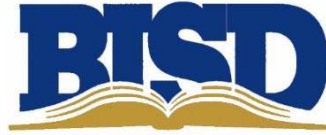
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BIRDVILLE INDEPENDENT SCHOOL DISTRICT





BIRDVILLE INDEPENDENT SCHOOL DISTRICT
BOARD OF TRUSTEES

Richard Davis	President
Ralph Kunkel	Vice President
Jack McCarty	Secretary
Joe Tolbert	Trustee
Kelvin Dilks	Trustee
Whitney Harding	Trustee
Kris Drees	Trustee

SUPERINTENDENT'S CABINET

Darrell G. Brown, Ph.D.	Superintendent
Elizabeth A. Clark, Ed.D.	Associate Superintendent for Curriculum and Instruction
Katie Bowman	Associate Superintendent for Finance
Skip Baskerville	Associate Superintendent for Human Resources, Governance and Support Services
Dave Lambson	Executive Director of Technology
Mark Thomas	Communications Officer

BIRDVILLE INDEPENDENT SCHOOL DISTRICT

Athletic Department

Chris Feris	Director of Athletics
Lesa Master	Assistant Athletic Director
Denise Hallam	Administrative Assistant
Debbie Sledge	Administrative Assistant
Vicki Barke	Administrative Assistant, FAAC

High School Coordinators

Jason Tucker, Mandy Rogers	Haltom High School
Ged Kates, Shelley Davis	Richland High School
Lon Holbrook, Eddie Brown	Birdville High School

Middle School Coordinators

Matthew Donnell	Haltom Middle School
Austin Woodall	North Richland Middle School
Demarcus Haskins	Richland Middle School
Johnny Evans	North Oaks Middle School
Justin Bates Kevin	Watauga Middle School
Martinson	Smithfield Middle School
Lauren Smeds	North Ridge Middle School

BIRDVILLE INDEPENDENT SCHOOL DISTRICT
HIGH SCHOOLS AND FEEDER SCHOOLS
2018-19

HALTOM HIGH SCHOOL (001)

5501 N. Haltom Road
Haltom City, TX 76137
David Hamilton, Principal
Jason Tucker, Campus Coord.
817-547-6000

Haltom Middle School (041)

5000 Dana Drive
Haltom City, TX 76117
Jill Balzer, Principal
Matt Donnell, Campus Coord.
817-547-4000

North Oaks Middle School (044)

4800 Jordan Park Drive
Haltom City, TX 76117
Jennifer Klaerner, Principal
Johnny Evans, Campus Coord.
817-581-5344

Watauga Middle School (045)

6300 Maurie Drive
Watauga, TX 76148
Shannon Houston, Principal
Justin Bates, Campus Coord.
817-547-4800

**SHANNON HIGH SCHOOL
(012)**

6010 Walker Street
Haltom City, TX 76117
David Williams, Principal
817-547-5400

RICHLAND HIGH SCHOOL (002)

5201 Holiday Lane East
N. Richland Hills, TX 76180
Carla Rix, Principal
Ged Kates, Campus Coord.
817-547-7000

N. Richland Middle School (042)

4801 Redondo St.
N. Richland Hills, TX 76180
Steve Ellis, Principal
Austin Woodall, Campus Coord.
817-581-5342

N. Ridge Middle School (047)

7332 Douglas Lane
N. Richland Hills, TX 76180
John Davis, Principal
Lauren Smeds, Campus Coord.
817-547-5200

BIRDVILLE HIGH SCHOOL (010)

9100 Mid-Cities Boulevard
N. Richland Hills, TX 76180
Jason Wells, Principal
Lon Holbrook, Campus Coord.
817-547-8000

Richland Middle School (043)

7400 Hovenkamp Ave.
Richland Hills, TX 76118
Mark McCanlies, Principal
Demarcus Haskins, Campus Coord.
817-595-5143

Smithfield Middle School (046)

8400 Main Street
Smithfield, TX 76180
Kyle Pekurney, Principal
Kevin Martinson, Campus Coord.
817-547-5000



Birdville Independent School District

Athletics Department

Chris Feris, Director

6108 Broadway • Haltom City, Texas 76117 • 817-547-5820 • Fax 817-547-5824 • www.birdvilleschools.net

This handbook is designed to serve as a guideline for the Birdville ISD Coaches. We hope that it will help you throughout the school year and the season that pertains to your coaching position. Please call the Athletic Office at any time if you have a question or concern (817-547-5820).

The University Interscholastic League is the governing body for the athletic programs in the Texas Public Schools. Our programs will fully support and enforce the rules set forth by the U.I.L.

As a Department, BISD Athletics exists to compliment the education of each individual that comes into contact with our programs. We strive to help each student-athlete develop and become the best that they can be at whichever sport they choose. However, not all students are capable of competing in certain programs. One of the most difficult tasks facing a coach is making the judgment as to who should be selected to compete in each program. Students are not obligated or required to participate in athletics. It should always be stressed that being a member of an athletic program is a privilege and not a right. Because it is a privilege, the coaches have the authority to revoke this privilege when rules are not followed.

Two of the best things that one can learn through an athletic contest are to deal with success and overcome adversity. Winning is the admirable goal of competition, but it is nothing if it comes at the expense of morals, ethics, and common sense. This is where we can teach those in our program how to succeed in a future they create, especially by showing good sportsmanship.

Being involved in athletics demands a lot of time and dedication from coaches and players alike. A coach must always remember that the student-athletes reflect your attitudes, beliefs, and work ethic. By demonstrating discipline, responsibility, and a strong work ethic, your programs will also display these traits. Develop these traits in the student-athletes in your program, and you will develop a program of which our entire community can be proud!

Chris Feris
Director of
Athletics
Birdville ISD

GUIDELINES AND RULES



ATHLETIC PHILOSOPHY

Win, lose, or draw, there are great values in educational competition. The pitting of one's skills, knowledge, and talent against friendly opponents is a means of learning one's own strengths and weaknesses. Good contests, properly supervised, give youthful competitors the opportunity to gain self-confidence, improve skill, and learn to win with humility and lose with grace.

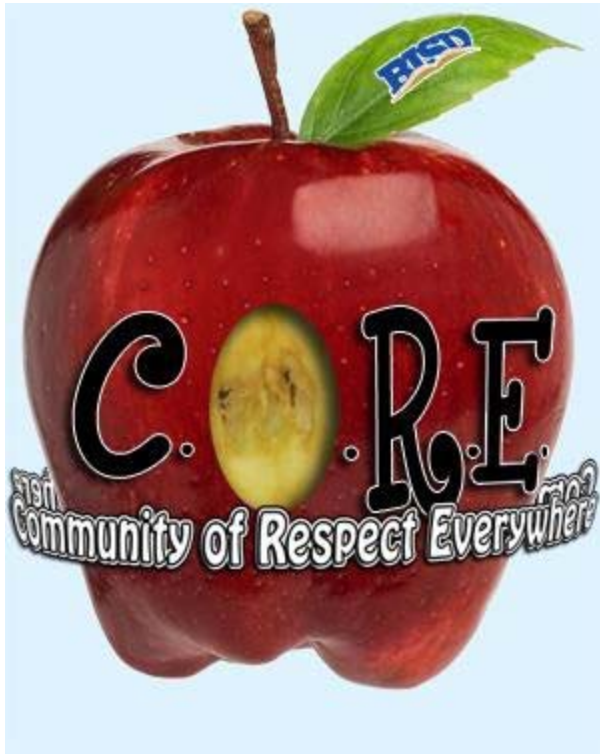
When we strive honestly to improve ourselves by measuring our progress against our friends, we are raising our knowledge to the limits of our abilities. By pitting our efforts against others, we learn how we stand, and we know what we must do to improve. The self-discipline and sacrifice involved in competition are keys to those same values that will be of great benefit to everyone in life. In the best of competition there are no losers.

Athletic participation is a privilege, not a right.

GOALS OF INTERSCHOOL ATHLETICS

For the program to be a vital part of the educational program and to insure the achievement of aims for the player, the student body, and the community, the following philosophical goals of athletics were developed:

1. Athletics must be for all students who are physically able to participate.
2. Athletics must (a) be educational, (b) contain desirable authorities, both local and state, and (c) have leadership by regular members of the school staff.
3. Athletic participation should contribute to (a) health and social competence, (b) moral values, (c) a sense of cooperation, (d) self-discipline, (e) a spirit of competition, and (f) a realization of values of group goals.
4. School athletics should be an educational force of great magnitude and should be used as such. A concerted effort should be made to capitalize on all the potential values of school athletics.
5. Judgment of the ability of an athlete should be based on what the participant can do, and not on who the athlete is socially, ethnically, or economically.
6. Athletic contests should always be played with emphasis on fun, physical development, skills, social experience, and good sportsmanship.



2018-2019

C.O.R.E. Values

1st Six Weeks

Value: Responsibility

Definition: Ability to distinguish between right and wrong and to be accountable for one's behavior.

Accountability

*"In a moment of decision
the best thing you
can do is the right thing.
The worst thing you can
do is nothing."*

~ Theodore Roosevelt

2nd Six Weeks

Value: Empathy

Definition: Ability to identify with and understand somebody else's feelings or difficulties. Understanding, Compassion

3rd Six Weeks

Value: Kindness

Definition: Being sympathetic and caring. Gentleness, Loving

4th Six Weeks

Value: Honesty

Definition: Being truthful, fair and trustworthy. Integrity

5th Six Weeks

Value: Acceptance

Definition: Willingness to treat someone or something of different views, cultures, religions or appearance with fairness. Open-mindedness

6th Six Weeks

Value: Courage

Definition: Ability to face difficulty or uncertainty without being overcome with fear. Bravery, Valor



Statement of Purpose

The University Interscholastic League believes:

- **that participation in extracurricular activities motivates students to place a high priority on attending school and making better grades.**
- **that most students enjoy the pursuit of excellence and seek opportunities to test themselves against their own accomplishments and the accomplishments of others,**
- **that such opportunities are best provided through properly conducted and equitably administered competitive activities, and**
- **that the classroom is enriched by the flow of student energy into the more intensified arena of competition and back into the classroom.**

Therefore, we reaffirm that students are the focus of our endeavor and deserve an opportunity to:

- **refine physical and mental skills,**
- **nurture self-realization and build self-confidence,**
- **feel a sense of pride and dignity,**
- **experience teamwork and develop a sense of fair play,**
- **develop the ability to lead and the willingness to follow,**
- **foster self-discipline and perseverance,**
- **appreciate that rules, consistently applied, create order and discipline,**
- **learn to accept graciously the decisions of judges and officials,**
- **affirm self-worth in times of disappointment as well as adulation,**
- **cultivate lifetime skills,**
- **complement their classwork with practice and performance,**
- **have fun,**
- **experience the joy of achieving their potential in a wholesome environment, and**
- **discover that ultimately the true meaning of winning is doing one's best.**

U.I.L. RULES

Middle School Athletics

I. RULES JURISDICTION

All public schools that participate in UIL activities in the middle school must abide by Public Schools Laws, TEA regulations, and UIL regulations.

II. MEMBERSHIP

Qualifications for membership - admission to membership of the high school or schools with which it is associated in the same independent school district qualifies the middle schools for membership.

III. ADMISSION TO MEMBERSHIP

See 3-2-2 of the UIL Constitution and Contest Rules.

IV. MEMBERSHIP DUES

See 3-1-1 of the UIL Constitution and Contest Rules.

V. CONTINUATION OF MEMBERSHIP

See 3-1-1 of the UIL Constitution and Contest Rules.

VI. CONFERENCE - DISTRICTS

Birdville middle schools will form a middle school conference. This conference is to be governed by middle school principals and administered by the office of the Athletic Director.

VII. PROTESTS

See 5-1-1, 5-1-2 and 5-2-1 of the UIL Constitution and Contest Rules.

In the Birdville middle school district, the Athletic Director considers all protests in dispute between middle school athletic teams within the district. When the office of the Athletic Director is unable to resolve the dispute between the middle schools involved, the principals of the Birdville middle schools will decide protests according to UIL guidelines.

The principal of a middle school will be responsible for age and academic eligibility of the students that participate in the UIL activities.

VIII. PENALTIES

The penalties as outlined in Article 6 of the UIL Constitution and Contest Rules will be imposed on the middle school violating the rules; in so far as, these rules are appropriate to high school competition.

IX. EXECUTIVE COMMITTEE

The State Executive committee may suspend the associated high school in the activity in which the middle school violates rules if the middle school does not abide by the ruling of the district executive committee. See 5-1-2- of the UIL Constitution and Contest Rules.

X. ELIGIBILITY (Age, Grade, Academic, and Missing Class Time Requirements)

Student's eligibility: An individual may participate in League competition or contest as a representative of a member school if he/she;

- 1) is a seventh grade student less than 14 years old on September 1,
- 2) is an eighth grade student less than 15 years old on September 1,
- 3) is a full-time, day student at the school he/she represents,

- 4) is in accordance with current semester scholarship rules, i.e., is passing seven days prior to the contest with four one-half credit courses, excluding physical education and/or activity courses
- 5) did not repeat the seventh grade for athletic purposes (ineligible in the eighth grade),
- 6) did not change schools within the previous year for athletic purposes,

- 7) a student who is failing a class may not miss that class to travel to or participate in UIL competition,
- 8) no game, contest, or tournament may begin prior to the end of the academic school day. Exception: students in middle school participating in high school music contests,
- 9) recommend that middle schools hold activities on a non-school night, at non-school times (Saturday) or end competition to allow students to be back at home school by no later than 10 p.m. on a school night.

XI. LIMITATION OF AWARDS

A member school may not give and a student may not accept awards for participation in interschool competition in excess of \$6.00 per year. A district championship trophy may be given. A student may accept a symbolic award in recognition of his/her achievement in an interschool contest if it is given by the organization conducting the contest. (EXAMPLE: all tournament trophies, ribbons, and medals in track and field).

XII. ATHLETIC PLAN

Number of Games:*

Football	Mandatory limit 9, but recommend no more than 8
Basketball	12 games, plus 2 tournaments
Volleyball	12 matches, plus 2 tournaments
Tennis	6 (including district tournaments)
Track & Field	6 meets (including district meets)
Cross Country	6 meets (including district meets)

*Note: It is recommended that no contest be scheduled on a night prior to a semester exam.

Number of Games or Meets per Week:

Football	1
Basketball	1
Volleyball	1

Tennis, Track & Field, and Cross Country

Shall be limited to no more than one meet a week.

Seasons for Workouts and Games

Football	As listed in the <u>UIL Constitution and Contest Rules</u>
Basketball	As listed in the <u>UIL Constitution and Contest Rules</u>
Volleyball	As listed in the <u>UIL Constitution and Contest Rules</u>

Officials

Athletic Director is responsible for obtaining officials.

Physical Examinations and Permits

As currently listed in the UIL Constitution and Contest Rules and according to the policy of Birdville School District.

Christmas Restriction

Middle schools shall select any five consecutive days, which include December 24, 25, and 26, for the holiday restriction. No school facilities, personnel, or equipment may be used during the five consecutive days. No practice shall be permitted on any of the five consecutive days. Any organized or required practice will be a violation of this regulation, with the following exceptions:

- (A) When December 26 falls on a Thursday, schools may participate in a tournament game on December 26.
- (B) When the 26th is used, schools must still follow a five consecutive day restriction, including December 24 and 25.
- (C) Travel will not be permitted on December 25.
- (D) Travel is permitted on the 26th if a morning game is scheduled on December 27.

Middle School Competition Code

There shall be no post-season playoffs in middle school.

Safety and Welfare Statement

To administer a program to require participants be properly examined, approved, equipped, classified, instructed, and supervised in order that a safe program be used.

IF A MIDDLE SCHOOL VIOLATES A RULE, THE HIGH SCHOOL IT FEEDS MAY BE SUSPENDED IN THAT SPORT BY THE STATE EXECUTIVE COMMITTEE, UNDER SOME CONDITIONS.

Athletic Administrative Guidelines

Campus Principal

The Principal/Campus Athletic Coordinator, along with the District Athletic Director will work together for coordination of each campus athletic program.

Participation

Middle School - Sub-Varsity: Every player on the team participates.

Varsity: The expectation is to play to win and utilize the student-athletes in a manner that best suits the program.

Club Sports

It is necessary to put every effort forth to co-exist without doing anything to jeopardize UIL/District or BISD guidelines.

Designated Coaches

Volunteer Coaches/Advisors are not permitted as per UIL and BISD rules. All coaches involved with BISD teams will be full time District Employees and adhere to UIL rules as listed in Section 1202 of the UIL Constitution and Contest Rules.

UIL Concerns and Athletic Monitoring

BISD Coaches will be in compliance with all UIL rules and regulations governing their sport(s). Each Head Coach is responsible for the academic monitoring of his/her student-athletes.

Media

Any contact with media will be handled professionally and cordially. Unusual media requests and/ or interviews must be approved by the Athletic Director or the Communications Officer for BISD.

Facility Usage

BISD facilities are for the use of BISD staff and student athletes. Other usage must be approved by the Athletic Department.

Employee Use of Personal Vehicle

An employee shall not transport a student(s) in a personal vehicle for any purpose to or from school property or a school-related event unless prior authorization is given by the campus principal. This rule does not apply to an employee transporting his or her own child.

PERSONAL USE OF ELECTRONIC MEDIA

POLICY DH

For purposes of this Employee Handbook, “electronic media” includes all forms of social media, such as text messaging, instant messaging, electronic mail (“e-mail”), web logs (“blogs”), electronic forums (“chat rooms”), video-sharing web sites (e.g., YouTube), social networking sites (e.g., Facebook, MySpace, Twitter, LinkedIn), and editorial comments posted on the Internet, as well as all forms of telecommunication such as landlines, cell phones, and web-based applications.

As role models for the district’s students and as representatives of the district, employees are responsible for their public conduct, even when not acting within their capacity as district employees. Employees will be held to the same professional standards in their public use of electronic media as they are for any other public conduct. If an employee’s use of electronic media interferes with the employee’s ability to effectively perform his or her job duties, the employee will be subject to disciplinary action up to, and including, termination of employment.

Employees are responsible for all content present on their personal social networking site or similar personalized electronic media. An employee who uses electronic media for personal purposes shall observe the following:

1. The employee may not set up or update the employee’s personal social networking page(s) using the district’s network;
2. The employee shall not use the district’s logo or other copyrighted materials of the district without express, written consent;
3. The employee continues to be subject to applicable state and federal laws, local policies, administrative regulations, and the Code of Ethics and Standard Practices for Texas Educators [See *Policy DH(Exhibit)*], even when communicating regarding personal and private matters, and regardless of whether the employee is using private or public equipment on or off campus. These restrictions include:
 - a) Confidentiality of student records and information [See *Policy FL(Legal)* and (*Local*);
 - b) Confidentiality of health or personnel information concerning colleagues, unless disclosure serves a lawful professional purpose of is required by law [See *Policy DH (Exhibit)*];
 - c) Confidentiality of district records, including educator evaluations and private e-mail addresses [See *Policy GBA(Legal)* and (*Local*)];
 - d) Copyright law [See Policy EFE (Legal) and (Local)];
 - e) Prohibition against harming others by knowingly making false statement about a colleague or the school system [See *Policy DH(Exhibit)*].

USE OF ELECTRONIC MEDIA WITH STUDENTS

Employees are prohibited from communicating with students through any form of electronic media unless such communication is covered by any one of the following three categories:

1. Communication between an employee and a student where a family relationship (i.e., relation by blood or marriage) exists;
2. Communication between an employee and a student where a social relationship exists which is consistent with the Code of Ethics and Standard Practices for Texas Educators [See *Policy DH (Exhibit)*]; or
3. Communication between an employee and a student where the employee is communicating with the student(s) within the scope of his or her professional responsibilities (e.g., for classroom teachers, matters relating to class work, homework, and tests; for an employee with an extracurricular duty, matters relating to the extracurricular activity).

Regardless of the relationship between an employee and a student which may permit a communication, any employee communicating with a student(s) shall be subject to all applicable state and federal laws, local policies, administrative regulations, and the Code of Ethics and Standard Practices for Texas Educators, including:

1. Compliance with the Family Educational Rights and Privacy Act (FERPA), including retention and confidentiality of the student records [See *Policy FL(Legal)* and (*Local*)];
2. Copyright
3. Prohibitions against soliciting or engaging in sexual conduct or a romantic relationship with a student [*Policy DF(Legal)* and (*Local*)]. Additionally, the following restrictions apply to those employees communicating with students within the scope of their professional responsibilities:

1. Employees communicating with students through any form of electronic media shall limit the content of such communications to matters within the scope of the employee’s professional responsibilities.
2. Communication with students through a social networking page is permitted only if the social networking page is created by the employee solely for the purpose of communicating with students and is accessible to parents and campus administrators. The employee must provide parents with reasonable notice and clear, written instructions for accessing the page prior to initiating communication with any student(s).
3. Employees do not have a right to privacy with respect to communications with students and parents.

SUMMARY OF RESPONSIBILITIES ATHLETIC COORDINATOR / MIDDLE SCHOOL

The Athletic Coordinator for each middle school is responsible for the coordination of the athletic program at the school. The Athletic Coordinator shall make necessary personnel assignments to fully utilize the staff to provide a complete, competitive, interscholastic program. This person shall be responsible to the high school athletic coordinator and the Director of Athletics.

DUTIES

The Athletic Coordinator / Middle School shall:

- work with the building principal, high school coordinator, and director of athletics to oversee the total athletic program at the middle school;
- attend meetings with the athletic director(s) and high school coordinator and communicate policy decisions and all pertinent information to the boys' and girls' coaches at the middle school;
- attempt to resolve grievances of coaching staff and promote an atmosphere of harmony and cooperation;
- work with principal and athletic director in the evaluation of staff;
- approve inventories, equipment requests, reimbursements, etc. before they are referred to the Director of Athletics;
- be knowledgeable of and see that all coaches follow the rules and guidelines as set forth by the Birdville Independent School District, University Interscholastic League, and Texas Education Agency;
- provide for the proper care and storage of equipment, issue equipment, and be responsible for the return of equipment issued;
- see that equipment inventories and requisition orders from all coaches are submitted to the Athletic Office;
- maintain files for necessary eligibility forms, insurance records, and similar paperwork;
- attend all sporting events on campus, in the Coliseum, or Stadium in a coaching role and/or a supervisory role in which the school is involved;
- promote good sportsmanship, fair play, and respect for one's teammates and opponents in all athletic events;
- enforce discipline and sportsmanlike behavior at all times by establishing guidelines and overseeing penalties for breach of such standards by individual students;
- encourage coaches to study coaching techniques and methods by attending coaching schools, clinics, seminars, meetings, etc.
- assist in all other matters not covered but delegated by the superintendent.
- ensure that all coaches on your staff are dressed professionally on game days and at practice.
- jeans are not acceptable game day coaching attire.

SUMMARY OF RESPONSIBILITIES ASSISTANT COACH / MIDDLE SCHOOL

The assistant coach at each middle school will be responsible for the promotion and leadership of each athletic program on the campus. Each coach will set an example of courtesy and sportsmanship for every student who participates in athletics. The highest expectations for academic as well as athletic achievement will be prescribed by each coach.

DUTIES

The Assistant Coach shall:

- coach and attend to any other duties as assigned by the athletic director(s), high school athletic coordinator, middle school athletic coordinator, and/or building principal;
- be aware of and follow the rules governing the respective sports as set forth by the Birdville Independent School District, University Interscholastic League, and the Texas Education Agency;
- attend staff development meetings as required by the Athletic Director, high school coordinator, campus coordinator, and/or principal;
- if not assigned a particular sport, conduct a comprehensive off-season program and assist other sports in season by running the clock, keeping the score book, assisting at cross-country meets, etc;
- keep accurate records of physicals, inventory, purchases, fund raisers, etc.
- be aware of and follow all safety precautions, first-aid rules, and guidelines dealing with the safety of the athletes.
- assist in preparing and carrying out a comprehensive workout schedule for each day of practice in the sport currently coaching.
- assist in the proper care and storage of equipment, issuing of equipment, and be responsible for the return of all equipment issued.
- coach track and assist at the middle school track meets;
- assist at high school track meets;
- assist the feeder high school by scouting football and/or basketball games and helping with spring football (men coaches);
- assist the feeder high school by scouting volleyball and/or basketball games (women coaches).
- to dress professionally on game days and at practice.



2018-2019 EXTRACURRICULAR HONOR CODE

Extracurricular Honor Code

Participation in extracurricular activities in the Birdville Independent School District is a privilege, not a right. The term “extracurricular activities” means, without limitation, all interscholastic athletics, cheerleading, drill team, academic clubs, special interest clubs, musical performances, dramatic productions, student government, and any other activity or group that participates in contests, competitions, or community service projects on behalf of or as a representative of Birdville ISD. The term includes any non-curricular event and membership or participation in groups, clubs, and organizations recognized and approved by the school district or campus. All extracurricular activity participants are subject to the provisions of this Extracurricular Honor Code.

Jurisdiction

Student participation in extracurricular activities is encouraged. Birdville ISD makes extracurricular activities available as an extension of the regular school program, with this important difference; participation in the regular curriculum is a right afforded to each student, while participation in the extracurricular program is a privilege that carries additional expectations for acceptable conduct. Students engaging in extracurricular activities represent not only themselves, but also other students and the school district when performing, competing, or participating in extracurricular activities and while wearing uniforms or other clothing that identifies the student to the community or public in any setting as Birdville ISD students.

Important goals of the extracurricular program are to give students direction in developing self-discipline, responsibility, pride, loyalty, leadership, teamwork, respect for authority, and healthy living habits.

Based on this philosophy, extracurricular participants must do the following at all times:

- Demonstrate the importance of academic excellence by maintaining eligibility through high academic standards.
- Practice good citizenship in all environments by respecting the property and rights of others.
- Be free from activities that result in felonious charges.
- Demonstrate knowledge of and be accountable for the individual rules of the extracurricular organization as outlined by the sponsor.

It is the responsibility of students, parents, sponsors/coaches, and the respective directors to ensure this high level of expectation. This code applies to all participants of extracurricular activities throughout the calendar year.

On Campus Behavior

All students are expected to adhere to the Birdville ISD Code of Conduct as it applies to school-related activities. Students involved in extracurricular activities are expected to exhibit the highest standards of ethics and conduct.

Students who violate school policies and are placed in in-school suspension (until the ISS is concluded), suspended, or sent to the DAEP (District Alternative Education Program), may not practice nor participate during the suspension or placement. Chapter 37 of the Texas Education Code prohibits a student who is assigned to the DAEP from being on a campus or attending a school activity whether on or off campus.

Off Campus Behavior

All students who participate in extracurricular activities are expected to exhibit the highest standards of ethics and conduct while off-campus, and these students may be disciplined for their off campus behavior.

Examples of off-campus violations that may lead to disciplinary action:

- Possession of tobacco, e-cigarettes, alcohol, steroids, drugs, look-alike drugs, or other illegal substances on campus or at school-sponsored activities
- Being at parties or other activities where tobacco, alcohol, steroids, drugs, look-alike drugs, or other illegal substances are present or being consumed by other individuals
- Engaging in serious misbehavior, as defined by the Birdville ISD Student Code of Conduct
- Conduct that causes injury or harm to others property or persons
- Using profanity, lewd or vulgar language, or obscene gestures toward others
- Any conduct that results in an arrest
- Sexting or other inappropriate Internet/electronic communications
- Bullying, harassment, and hazing at all times

(This is a non-inclusive list and must be confirmed by the student, student's parent/guardian, law enforcement official or a school employee who has knowledge of a violation prior to the campus administration making a decision.)

Off Campus Consequences

1st Offense – Suspension from extracurricular activities for 15 school days

2nd Offense – Suspension from extracurricular activities for 30 school days

3rd Offense – Suspension from extracurricular activities for a calendar year.

If the offense occurs during the activity season, the suspension begins immediately.

If the student chooses to join a new activity that they have not participated in previously, they will be suspended in the student's primary activity.

If the offense occurs in the off-season, post-season or in the summer, the suspension begins on the first date of a scheduled game, competition, or extracurricular event the following school year. Students, who are suspended for off-campus behavior may practice but may not participate in competitions, suit-out, or travel with the team for the competitions.

Non-Inclusive Example of Disciplinary Consequences for Off-Campus

1st Offense incident that occurred on March 15:

	PARTICIPANT	DISCIPLINARY CONSEQUENCE
Student 1	Fall Sport	15 day suspension begins date of the first competition
Student 2	Spring Sport	15 day suspension begins immediately if competition has begun
Student 3	Band Student	15 day suspension begins immediately if any competitions remain, if concluded, it will begin on first football competition
Student 4	Cheerleader/Drill Team	Student may still try-out for cheerleader/drill team and 15 day suspension begins on date of first football competition
Student 5	Student Council Member	15 day suspension begins immediately
Student 6	FFA Student	15 day suspension begins the date of the next show
Student 7	Spring Sport	Student is a softball player and has been for 2 years. In October they violate the honor code. Student goes to the Wrestling Coach and request to join team to avoid getting suspended from softball. 15 day suspension begins the date of the first softball game due to avoidance of missing primary sport.

The preceding table provides examples; but the campus principal, executive director of student services, and appropriate director may adjust the dates in order to ensure district-wide consistency (based on a consensus of the group). A student who is in multiple activities will serve the penalty once and at the earliest possible time.

Appeal Process

The parent or guardian may appeal the extracurricular suspension using the format in the Code of Conduct Booklet (DAEP placements).

- I. Level I – The parents have three days to appeal the suspension to the campus principal.

2. Level II – The parents have three days from the principal’s decision to send an appeal to the Director of Student Services.

Any decision by the Level II Hearing Officer/Panel is final and may not be appealed. The student remains suspended from extracurricular activities during the appeal process.

Acknowledgement

A condition to participating in any extracurricular activity or holding an office (elected or appointed) is to sign an acknowledgement that the student and parent have read and understand the Extracurricular Honor Code. Students are unable to participate until this form is signed and returned to the appropriate coach, director, or sponsor.

DATE _____

I have read the Birdville ISD Honor Code and agree to adhere to these rules as a condition for my voluntary participation in Birdville ISD extracurricular activities. I understand that failure to do so will result in disciplinary measures related to my extracurricular participation.

STUDENT NAME _____

STUDENT SIGNATURE _____

I have read the Birdville ISD Honor Code and understand requirements for my child’s voluntary participation in Birdville ISD. I understand the consequences that my child will face if he or she fails to adhere to these rules and agree to such terms.

PARENT NAME _____

PARENT SIGNATURE _____

STUDENTS:

- **Please Return Form to Coach or Sponsor**
- **Please note that students are UNABLE to participate until this form is signed and returned to the appropriate coach, director or sponsor.**
- **Please note that this Honor Code will remain in place through all summer activities during the summer of 2018 & summer of 2019.**

HEAT GUIDELINES

The following are precautionary guidelines for coaches and trainers to follow in the prevention of heat related illnesses and emergencies. These guidelines should be strictly followed.

- Gradually Acclimatize Athletes – Start slowly, and take your time getting the student/athletes “back in shape”. Athletes often return to school having lost the aerobic capacity they may have had at the close of last season.
- Ensure that your athletes drink fluids even before they feel thirsty Always urge athletes to drink water before, during, and after physical activity. They should have unlimited access to cold water. Do not restrict water as a form of motivation.
- Identify Susceptible Athletes – Those athletes who are obese or have a larger muscle mass tend to have more heat related problems. Keep a close eye on these athletes.
- Encourage a Good Diet – Athletes must eat breakfast and lunch to practice in extreme heat.
- Uniforms – Use lightweight workout clothing in hot weather months. Be aware of athletes wearing unnecessary extra clothing.

The Temperature-Humidity Index (THI) is a measurement of ambient temperature and relative humidity. A sling or digital psychrometer measures both to give a THI reading. The Athletic Department will take necessary steps to ensure each of the ten campuses has a tool for measuring the temperature and relative humidity.

Please use the attached chart for the determination of suspension or modification of practice sessions.

Air Temp.	Relative Humidity in Percentage																		
	15	20	25	30	35	40	45	50	55	60	65	70	75	80	85	90	95	100	
125	<i>131</i>	<i>141</i>																	
120	123	<i>130</i>	<i>139</i>	<i>148</i>															
115	115	120	127	<i>135</i>	<i>143</i>	<i>151</i>													
110	108	112	117	123	<i>130</i>	<i>137</i>	<i>143</i>	<i>150</i>											
105	102	105	109	113	118	123	129	<i>135</i>	<i>142</i>	<i>149</i>									
100	97	99	101	104	107	110	115	120	126	<i>132</i>	<i>138</i>	<i>144</i>	<i>150</i>						
95	91	93	94	96	98	101	104	107	110	114	119	124	<i>130</i>	<i>136</i>	<i>140</i>	<i>150</i>			
90	86	87	88	90	91	93	95	96	98	100	102	106	109	113	117	122	126	<i>131</i>	
85	81	82	83	84	85	86	87	88	89	90	91	93	95	97	99	102	105	108	
80	76	77	77	78	79	79	80	81	81	82	83	84	85	86	87	88	89	90	
75	71	72	72	73	73	74	74	75	75	76	76	77	77	78	78	79	79	80	
70	65	66	66	67	67	68	68	69	69	70	70	70	70	71	71	71	71	72	

ANY READING IN ITALICS - NO PRACTICE

ANY READING IN BOLD - MODIFY PRACTICE

**BISD
COLD WEATHER POLICY**

Wind chill under 35 degrees with rain:

35 minutes of exposure, 20
minutes inside gym,

35 minutes of exposure,
20 minutes inside

*Extremities covered at all times

Wind chill under 32 degrees without rain:

45 minutes of total exposure

*Athletes must be in warm ups with extremities covered

Wind chill 32 degrees with rain:

All practices inside

No outside exposure

Wind chill 30 degrees without rain:

30 minutes of total exposure

*Athletes must be in warm-ups at all times with extremities covered

Wind chill 20 degrees:

There will be no outside practices – everything indoors

LIGHTNING GUIDELINES

On average, lightning causes more casualties annually in the U.S. than any other storm-related phenomena, except floods. Many people incur injuries or are killed due to misinformation and inappropriate behavior during thunderstorms.

The Flash to Bang method of estimating the distance between you and a lightning flash is most accurate. It is the most reliable, easiest way to estimate how far away lightning is occurring. Thunder always accompanies lightning; therefore, the flash to bang method works like this:

- Count the number of seconds, once lightning flash is sighted, until the thunder (bang) is heard – divide by 5 to obtain how far away (in miles) the lightning is occurring. For example: if an individual counts 15 seconds between seeing the flash and hearing the bang, 15 divided by five equals three; therefore, the lightning flash is approximately three miles away. The SkyScan lightning detector will be used as an aid to the “Flash to Bang” method – the SkyScan detects strikes that are sky to ground, not cloud to cloud.

The “30-30” Rule

Criteria for Suspension of Activities - By the time the “Flash to Bang” count approaches 30 seconds, all individuals should be inside a safe shelter.

Criteria for Resumption of Activities – Wait at least 30 minutes after the last sound (thunder) or observation of lightning before leaving safe shelter.

Unsafe Shelter

- Metal or wooden bleachers
- Underneath bleachers
- High places and open fields
- Underneath trees
- Dugouts, flagpoles, metal fences

Safe Shelter

- Any building normally occupied or frequently used by people
- Any vehicle with a hard metal roof (not a convertible) and rolled up windows
- School bus
- 20-40 miles – Awareness of lightning; monitor its progress
- 8-20 miles – Monitor closely
- 3-8 miles – Remove athletes from field; play should not resume until 30 minutes have passed without a strike within this range or closer.

Facts Regarding the Awesome Nature of Lightning

- Bolts of lightning reach heat as high as 50,000 degrees.
- There are 16 million thunderstorms per year in the world.
- One half of all lightning bolts divide into two or more bolts.
- A lightning bolt can strike in one million of a second.
- Annually in the United States about 100,000 thunderstorms occur.
- Ten percent of all thunderstorms are capable of producing tornadoes, high winds, and flash floods.
- The average thunderstorm is six to ten miles wide.
- The average rate of travel for a thunderstorm is 25 miles per hour.
- The average lightning strike is six miles long.
- A lightning bolt is incredibly powerful, carrying up to 30 million volts at 100,000 amps.
- Two hundred deaths and 700 injuries are caused annually in the United States by thunderstorms.
- Lightning causes an estimated 5 to 6 billion dollars in direct or indirect property damages each year.
- Florida is the state with the highest rate of incident.

ATHLETIC POLICY CONCERNING INFECTIOUS DISEASES TRANSMITTED THROUGH BLOOD AND BODY FLUIDS

INTRODUCTION:

The transmission of infectious diseases through blood and bodily fluids includes the HIV and Hepatitis B and D viruses. Through participation in athletics and the treatment of athletic injuries, participants, trainers, and coaches are involved with and introduced to contact with blood and body fluids. The Hepatitis B illness accounts for more than 10,000 hospital admissions a year. It is also the ninth leading cause of death worldwide. More than 200 million people are chronic carriers of the Hepatitis B virus. The Hepatitis B virus is often linked to HIV, the virus that causes AIDS. The Hepatitis B virus is far more widespread throughout the world and is 300 times more contagious than HIV. It is estimated that 5,000 people worldwide are infected daily with the HIV virus.

PLAN OF ACTION:

It is imperative that procedures for properly discarding body fluids during athletic contests be followed specifically and completely. If a player vomits or secretes any body fluids such as blood due to injury onto the playing surface, it is the responsibility of the coach to recognize this situation and stop play.

The following steps should take place:

1. The coach should approach the officials and explain the situation.
2. The coach should then alert a custodian and make sure correct procedures are followed in disposal of the body fluids. Our custodians are trained to correctly dispose of the fluids.
3. The administrator on duty at the time of the incident should also be notified in order to help secure custodial help.

CARING FOR PARTICIPANTS (PATIENTS):

1. All trainers and coaches should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure when contact with blood/body fluids of any patients is anticipated. Gloves should be worn for touching blood/body fluids, mucous membranes, or non-contact skin of all patients, for handling items or surfaces soiled with blood or body fluids. Vomit is considered a body fluid. Gloves should be changed after contact with each patient. Masks and protective eyer or face shields should be worn by all trainers during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of mucous membranes of the mouth, nose, and eyes. Gowns and aprons should be worn by all trainers during procedures that are likely to generate splashes of blood or other body fluids.

2. Hand and other skin surfaces should be washed immediately and thoroughly if contaminated with blood or body fluids. Hands should be washed immediately after gloves are removed.

3. Instruments used for treating open wounds must be cleaned and disinfected before and after use.

4. Although saliva has not been implicated in HIV transmission, to minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, or other ventilation devices should be available for use in areas in which the need for resuscitation is predictable.

5. Trainers and coaches who have open sores/wounds or weeping dermatitis should refrain from all direct patient care and from handling patient care equipment until the condition resolves.

6. Pregnant coaches are not known to be a greater risk of contracting HIV infection than coaches who are not pregnant; however, if a coach develops HIV infection during pregnancy, the infant is at risk of infection resulting from prenatal transmission. Because of this risk, coaches should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission.

CARING FOR EQUIPMENT/CLOTHING:

1. Gloves and other materials used for direct contact with blood/body fluids should be put in a plastic bag or lined trashcan. Plastic bags should be changed daily and disposed of routinely. Double bagging can be used when there is a high risk of contamination.

2. Clothing items that are soaked through to the skin should be removed and placed in a separate container for laundering. Items laundered for school use should be washed with detergent in hot water cycle (160°F) before using. If low temperature (158°F) laundry cycles are used, chemicals suitable for low temperature washing at proper use concentration should be used. Uniforms with blood should be separated and washed separately. Anyone handling soiled equipment should wear protective gloves.

3. Contaminated disposable items (tissues, paper towels) should be handled with rubber gloves.

4. Maintenance responsibilities should include daily cleaning with bleach/germicide as in (a) particularly areas where contact with body fluids (such as locker rooms, locker room toilets, sinks, student and staff lockers, etc.) is likely. Plastic bags should also be changed daily and disposed of routinely; rubber gloves should be worn.

5. Various classes of disinfectants are listed: (hypo chlorite solution (bleach) is preferred for objects that may be put in the mouth.)

a. Ethyl or isopropyl alcohol (70%) should be used on all materials or goods such as uniforms, etc:

b. Lysol

c. 1/2 cup household bleach in one gallon of water, needing to be freshly prepared each time it is used, should be used on all hard surfaces such as tables, counter, shoulder pads, helmets, etc.

Insurance Options

Injuries happen in sports. Unfortunately without insurance major injuries can get expensive. We would like you to be prepared for when your child gets injured and needs medical attention.

The school district does not purchase insurance for school injuries or athletic injuries. You assume all liability by allowing your student athlete to participate and by signing the required Emergency Information sheet. There are options though! Below is information about insurance policies available for you to purchase.

Student Accident Insurance – The Hartford Group

- Available to all students enrolled in BISD.
- Available options (one time payments, prices may vary. Please contact the company for exact costs)

School Time Coverage - \$40.00

Optional Football Coverage - \$230.00

24 hour Coverage - \$125.00

Extended Dental Benefit - \$8.00

- Brochures are available in the school office
- For more information please contact:

Bene-Marc, Inc

6301 Southwest Blvd, Suite 101

Fort Worth, TX 76132

817-738-6899

Cook Children's Health Plan

- toll free 1-866-971-COOK(2665)
- www.cookchp.org

CHIP/ Children's Medicaid / Texas Star Program

- toll free 1-877-KIDS-NOW (1-877-543-7669)

MASTER SCHEDULES



HEB & Blg 12 Master Athler1c Calendar 2018-2019

5/24/18	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
A	20 Classes Begin	21	22	23	24	25
A/S	27	28	29	30	31	1
S	3	4	5	6	7	8
S	10 7&8VB-1	11 8FO-1	12	13	14	15
S	17 7&8V8-2/7FB	18 8F2	19	20	21	22
S	24 7&8VB-3/7FB-2	25 8FB	26	27	28	29
O	1 7&8VB-4/7FB	2 8F8-4	3	4	5	6
O	8	9 8FB S	10 7&8VB-5/7FB	11	12	13 7&8AVB Tourn.
O	15 7&8VB-6/7FB-S	16 8F8-6	17	18	19	20
O	22 7&8V8-7/7F8-6	23 8F8-7	24	25	26	27 7&8V8 Tourn.
O/N	29 7&8V8-8/7F8-7	30 8F8-8	31	1	2	3
N	5 7&8V8-9/7F0-8	6 8FB Showcase	7	8	9 7&8VB Dist. Tourn.	10 7&8VO Dist. Tourn.
N	12	13	14	15	16	17
N	19	20	21	22	23	24
N/D	26	27	28 788-1	29 888-1	30	1
D	3 788-2	4	5	6 888-2	7	8
D	10 788-3	11	12	13 888-3	14	15
D	17	18	19	20	21	22
D	24	25	26	27	28	29
J	31	1	2	3	4	5
J	7	8	9 78B-4	10 888-4	11	12
J	14 788-5	15 888-5	16	17 Exams	18 Exams	19
J	21	22	23 788-6	24 888-6	25 7&8A88 Tourn.	26 7&8A88 Tourn.
J/F	28 788-7	29	30	31 888-7/7&8 Ten-1	1	2
F	4 71111-8	5	6	7 8811-8/7&8 Ten-2	8 7&811811 Tourn.	9 7&811118 Tourn.
F	11 788-9	12	13	14 8118 9/7&8 Ten-3	15	16
F	18	19 788 Dist. Tourn.	20	21 888 DisTrn/7&8 Ten-4	22 7&8BB Dist. Tourn.	23 7&888 Dist. Tourn.
F/M	25	26 7&8 Tennis-5	27	28 Fine Am	1	2
M	4 7&8TR-1	5 Fme Art\	6 Fme Arts	7 Fine Arts/HS Meet	8	9
M	11	12	13	14	15	16
M	18	19 7&8TR-2	20	21 7&8TR-2/7&8 Ten-mu	22 HS Meet	23
M	25	26 7&8TR-3	27	28 7&8TR-3/7&8 Ten-mu	29	30
A	1	2 7&8TR-4 Zone	3 7&8TR Makeup Day	4 Fine Arts	5 Fine Arts	6
A	8	9 7&8 STAAR	10 8 STAAR	11 7&8TR-5 District	12 7&8TR Makeup Day	13
A	15	16	17	18 81SD CC 1	19	20
A	22 81SD CC 2	23	24	25	26	27
A/M	29 81SD CC 3	30	1	2	3	4
M	6 BISD CC 4	7	8	9	10	11
M	13 /1 STAAR	14 7 STAAR	15 8 STI111	16 /8 STI1AR	17	18
M	20	21	22	23	24	25
M/J	27	28	29	30 Classes End	31	1

Big 12 Tournament and Meet Assignments 2018-2019

Event	Date	HEB Host	BISD Host
7A VB	Sat. 10/13	Eules	Richland
8A VB	Sat. 10/13	Hurst	Smithfield
7B VB	Sat. 10/27	Bedford	Watauga
8B VB	Sat. 10/27	Harwood	North Richland
7 Dist. VB	Fri.-Sat. 11/9-10		Haltom
8 Dist. VB	Fri.-Sat. 11/9-10		North Oaks
7/8 CC-1	Tues. 11/13	Harwood	
7/8 CC-2	Tues. 11/27	Bedford	
7/8 CC-3	Tues. 12/4	Hurst	
7/8 CC-District	Tues. 12/11	Eules	
7A GBB	Fri.-Sat. 1/25-26	Eules	Haltom
7A BBB	Fri.-Sat. 1/25-26	Hurst	Watauga
8A GBB	Fri.-Sat. 1/25-26	Bedford	Richland
8A BBB	Fri.-Sat. 1/25-26	Harwood	North Richland
7B GBB	Fri.-Sat. 2/8-9	Hurst	North Oaks
7B BBB	Fri.-Sat. 2/8-9	Eules	Smithfield
8B GBB	Fri.-Sat. 2/8-9	Harwood	Watauga
8B BBB	Fri.-Sat. 2/8-9	Bedford	North Ridge
7 Dist. GBB	Tues., Fri., Sat. 2/19, 22-23		Smithfield
7 Dist. BBB	Tues., Fri., Sat. 2/19, 22-23		North Richland
8 Dist. GBB	Thurs., Fri., Sat. 2/21-23		North Ridge
8 Dist. BBB	Thurs., Fri., Sat. 2/21-23		Richland
7 TR-Practice Meets	Mon. 3/4	Bedford/Central	North Oaks
8 TR-Practice Meets	Mon. 3/4	Eules	North Ridge
			Smithfield
7 & 8 TR-2	Tues. 3/19	Central	
7 & 8 TR-2	Thurs. 3/21	Hurst	Watauga
7 & 8 TR-3	Tues. 3/26		Richland
7 & 8 TR-3	Thurs. 3/28	Bedford	Haltom
7 & 8 TR-Zone	Tues. 4/2	Harwood	North Richland
7 & 8 TR-District	Thurs. 4/11	Central	

2018 BISD VARSITY FOOTBALL SCHEDULE**BIRDVILLE HIGH SCHOOL**

<u>DATE</u>	<u>TIME</u>	<u>OPPONENT</u>	<u>SITE</u>
Fri., Aug. 31	7:00pm	@ Keller Central HS	Keller ISD Stadium
Fri., Sept. 7	7:00pm	@ Little Elm HS	Little Elm ISD Athletic Complex
Fri., Sept. 14	7:30pm	Weatherford HS	FAAC
Fri., Sept. 21		OPEN	
Fri., Sept. 28	7:00pm	R. L. Turner HS*	FAAC
Fri., Oct. 5	7:00pm	@ Grapevine HS	Mustang-Panther Stadium
Fri., Oct. 12	7:00pm	Creekview HS	FAAC
Thurs., Oct. 18	7:00pm	Denton HS	FAAC
Fri., Oct. 26	7:00pm	@ Newman Smith HS	Standridge Stadium
Fri., Nov. 2	7:00pm	Colleyville Heritage HS**	FAAC
Thurs., Nov. 8	7:00pm	@ Denton Ryan HS	Collins Stadium

HALTOM HIGH SCHOOL

<u>DATE</u>	<u>TIME</u>	<u>OPPONENT</u>	<u>SITE</u>
Thurs., Aug 30	7:00pm	@ Saginaw HS	Rough Rider Stadium
Fri., Sept. 7	7:30pm	Paschal HS*	Birdville Stadium
Fri., Sept. 14	7:30pm	Lake Highlands HS	Birdville Stadium
Fri., Sept. 21	7:30pm	@ North Mesquite HS	Mesquite Memorial
Fri., Sept. 28		OPEN	
Fri., Oct. 5	7:30pm	Weatherford HS	Birdville Stadium
Fri., Oct. 12	7:30pm	@ Trinity HS	Pennington Field
Fri., Oct. 19	7:30pm	Abilene HS**	FAAC
Fri., Oct. 26	7:30pm	@ Richland HS (RHS home)	FAAC
Fri., Nov. 2	7:30pm	L.D. Bell HS	Birdville Stadium
Fri., Nov. 9	7:00pm	@ San Angelo Central HS	San Angelo Stadium

RICHLAND HIGH SCHOOL

<u>DATE</u>	<u>TIME</u>	<u>OPPONENT</u>	<u>SITE</u>
Fri., Aug. 31	7:30pm	Frisco Lone Star HS	FAAC
Fri., Sept. 7	7:30pm	Keller Central HS	FAAC
Fri., Sept. 14	7:30pm	@ Rockwall Heath HS	Wilkerson-Sanders Stadium
Fri., Sept. 21	7:30pm	Arlington Lamar HS	FAAC
Fri., Sept. 28	7:30pm	@Abilene HS	Shotwell Stadium
Fri., Oct. 5	7:30pm	OPEN	
Thurs., Oct. 11	7:00pm	L.D.Bell HS	FAAC
Fri., Oct. 19	7:00pm	@San Angelo Central HS	San Angelo Stadium
Fri., Oct. 26	7:30pm	Haltom HS (RHS home)*	FAAC
Fri., Nov. 2	7:30pm	@Weatherford HS	Kangaroo Stadium
Fri., Nov 9	7:30pm	Trinity HS**	FAAC

FAAC = Fine Arts/Athletics Complex

* Homecoming
** Senior Night

ADMISSION POLICY TO CONTESTS

BIRDVILLE ATHLETIC DEPARTMENT

Admission will be charged at athletic events held in Birdville Stadium, Fine Arts/Athletics Complex, W.G. Thomas Coliseum and/or individual campuses regardless of level.

Admission may be charged for tournament play on any campus (**Maximum:** \$4 Adults, \$2 Students).

FORMS



PREPARTICIPATION PHYSICAL EVALUATION -- MEDICAL HISTORY

This **MEDICAL HISTORY FORM** must be completed *annually* by parent (or guardian) and student in order for the student to participate in athletic activities. These questions are designed to determine if the student has developed any condition which would make it hazardous to participate in an athletic event.

Student's Name: (print) _____ Sex _____ Age _____ Date of Birth _____
 Address _____ Phone _____
 Grade _____ School _____
 Personal Physician _____ Phone _____

In case of emergency, contact:

Name _____ Relationship _____ Phone (H) _____ (W) _____

Explain "Yes" answers in the box below**. Circle questions you don't know the answers to.

	Yes	No		Yes	No
1. Have you had a medical illness or injury since your last check up or sports physical?	<input type="checkbox"/>	<input type="checkbox"/>	13. Have you ever gotten unexpectedly short of breath with exercise?	<input type="checkbox"/>	<input type="checkbox"/>
2. Have you been hospitalized overnight in the past year?	<input type="checkbox"/>	<input type="checkbox"/>	Do you have asthma?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had surgery?	<input type="checkbox"/>	<input type="checkbox"/>	14. Do you have seasonal allergies that require medical treatment?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever had prior testing for the heart ordered by a physician?	<input type="checkbox"/>	<input type="checkbox"/>	Do you use any special protective or corrective equipment or devices that aren't usually used for your sport or position (for example, knee brace, special neck roll, foot orthotics, retainer on your teeth, hearing aid)?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever passed out during or after exercise?	<input type="checkbox"/>	<input type="checkbox"/>	15. Have you ever had a sprain, strain, or swelling after injury?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had chest pain during or after exercise?	<input type="checkbox"/>	<input type="checkbox"/>	Have you broken or fractured any bones or dislocated any joints?	<input type="checkbox"/>	<input type="checkbox"/>
Do you get tired more quickly than your friends do during exercise?	<input type="checkbox"/>	<input type="checkbox"/>	Have you had any other problems with pain or swelling in muscles, tendons, bones, or joints?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had racing of your heart or skipped heartbeats?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, check appropriate box and explain below:		
Have you had high blood pressure or high cholesterol?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Head <input type="checkbox"/> Elbow <input type="checkbox"/> Hip		
Have you ever been told you have a heart murmur?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Neck <input type="checkbox"/> Forearm <input type="checkbox"/> Thigh		
Has any family member or relative died of heart problems or of sudden unexpected death before age 50?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Back <input type="checkbox"/> Wrist <input type="checkbox"/> Knee		
Has any family member been diagnosed with enlarged heart, (dilated cardiomyopathy), hypertrophic cardiomyopathy, long QT syndrome or other ion channelopathy (Brugada syndrome, etc), Marfan's syndrome, or abnormal heart rhythm?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Chest <input type="checkbox"/> Hand <input type="checkbox"/> Shin/Calf		
Have you had a severe viral infection (for example, myocarditis or mononucleosis) within the last month?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Shoulder <input type="checkbox"/> Finger <input type="checkbox"/> Ankle		
Has a physician ever denied or restricted your participation in sports for any heart problems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Upper Arm <input type="checkbox"/> Foot		
4. Have you ever had a head injury or concussion?	<input type="checkbox"/>	<input type="checkbox"/>	16. Do you want to weight more or less than you do now?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been knocked out, become unconscious, or lost your memory?	<input type="checkbox"/>	<input type="checkbox"/>	17. Do you feel stressed out?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, how many times? _____			18. Have you ever been diagnosed with or treated for sickle cell trait or cell disease?	<input type="checkbox"/>	<input type="checkbox"/>
When was your last concussion? _____			<i>Females Only</i>		
How severe was each one? (Explain below)			19. When was your first menstrual period? _____		
Have you ever had a seizure?	<input type="checkbox"/>	<input type="checkbox"/>	When was your most recent menstrual period? _____		
Do you have frequent or severe headaches?	<input type="checkbox"/>	<input type="checkbox"/>	How much time do you usually have from the start of one period to the start of another? _____		
Have you ever had numbness or tingling in your arms, hands, legs or feet?	<input type="checkbox"/>	<input type="checkbox"/>	How many periods have you had in the last year? _____		
Have you ever had a stinger, burner, or pinched nerve?	<input type="checkbox"/>	<input type="checkbox"/>	What was the longest time between periods in the last year? _____		
5. Are you missing any paired organs?	<input type="checkbox"/>	<input type="checkbox"/>	<i>Males Only</i>		
6. Are you under a doctor's care?	<input type="checkbox"/>	<input type="checkbox"/>	20. Do you have two testicles? _		
7. Are you currently taking any prescription or non-prescription (over-the-counter) medication or pills or using an inhaler?	<input type="checkbox"/>	<input type="checkbox"/>	21. Do you have any testicular swelling or masses? _		
8. Do you have any allergies (for example, to pollen, medicine, food, or stinging insects)?	<input type="checkbox"/>	<input type="checkbox"/>			
9. Have you ever been dizzy during or after exercise?	<input type="checkbox"/>	<input type="checkbox"/>			
10. Do you have any current skin problems (for example, itching, rashes, acne, warts, fungus, or blisters)?	<input type="checkbox"/>	<input type="checkbox"/>			
11. Have you ever become ill from exercising in the heat?	<input type="checkbox"/>	<input type="checkbox"/>			
12. Have you had any problems with your eyes or vision?	<input type="checkbox"/>	<input type="checkbox"/>			

An individual answering in the affirmative to any question relating to a possible cardiovascular health issue (question three above), as identified on the form, should be restricted from further participation until the individual is examined and cleared by a physician, physician assistant, chiropractor, or nurse practitioner.

****EXPLAIN 'YES' ANSWERS IN THE BOX BELOW (attach another sheet if necessary):**

It is understood that even though protective equipment is worn by the athlete, whenever needed, the possibility of an accident still remains. Neither the University Interscholastic League nor the school assumes any responsibility in case an accident occurs.

If, in the judgment of any representative of the school, the above student should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given said student by any physician, athletic trainer, nurse or school representative. I do hereby agree to indemnify and save harmless the school and any school or hospital representative from any claim by any person on account of such care and treatment of said student.

If, between this date and the beginning of athletic competition, any illness or injury should occur that may limit this student's participation, I agree to notify the school authorities of such illness or injury.

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct. Failure to provide truthful responses could subject the student in question to penalties determined by the UIL

Student Signature: _____

Parent/Guardian Signature: _____

Date: _____

Any Yes answer to questions 1, 2, 3, 4, 5, or 6 requires further medical evaluation which may include a physical examination. Written clearance from a physician, physician assistant, chiropractor, or nurse practitioner is required before any participation in UIL practices, games or matches. THIS FORM MUST BE ON FILE PRIOR TO PARTICIPATION IN ANY PRACTICE, SCRIMMAGE OR CONTEST BEFORE, DURING OR AFTER SCHOOL.

For School Use Only:

This Medical History Form was reviewed by: PrintedName _____ Date _____ Signature _____

ACKNOWLEDGEMENT OF RULES

Attention School Authorities: This form must be signed yearly by both the student and parent/guardian and be on file at your school before the student may participate in any practice session, scrimmage, or contest. A copy of the student's medical history and physical examination form signed by a physician or medical history form signed by a parent must also be on file at your school.

Student's Name _____ Date of Birth _____
Current School _____

Parent or Guardian's Permit

I hereby give my consent for the above student to compete in University Interscholastic League approved sports, and travel with the coach or other representative of the school on any trips.

It is understood that even though protective equipment is worn by the athlete whenever needed, the possibility of an accident still remains. Neither the University Interscholastic League nor the high school assumes any responsibility in case an accident occurs.

I have read and understand the University Interscholastic League rules on the reverse side of this form and agree that my son/daughter will abide by all of the University Interscholastic League rules.

The undersigned agrees to be responsible for the safe return of all athletic equipment issued by the school to the above named student.

If, in the judgement of any representatives of the school, the above student needs immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given to said student by any physician, licensed athletic trainer, nurse, hospital, or school representative; and I do hereby agree to indemnify and save harmless the school and any school representative from any claim by any person whomsoever on account of such care and treatment of said student.

I have been provided the UIL Parent Information Manual regarding health and safety issues including concussions and my responsibilities as a parent/guardian. I understand that failure to provide accurate and truthful information on UIL forms could subject the student in question to penalties determined by the UIL.

The UIL Parent Information Manual is located at www.uil texas.org/files/athletics/manuals/parent-information-manual.pdf.

Your signature below gives authorization that is necessary for the school district, its licensed athletic trainers, coaches, associated physicians and student insurance personnel to share information concerning medical diagnosis and treatment for your student.

To the Parent: Check any activity in which this student is allowed to participate.

- | | | | |
|--|-----------------------------------|--|--|
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Football | <input type="checkbox"/> Softball | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Golf | <input type="checkbox"/> Swimming & Diving | <input type="checkbox"/> Track & Field |
| <input type="checkbox"/> Cross Country | <input type="checkbox"/> Soccer | <input type="checkbox"/> Team Tennis | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Wrestling | | | |

Date _____

Signature of parent or guardian _____

Street address _____

City _____ State _____ Zip _____

Home Phone _____ Business Phone _____

GENERAL INFORMATION

School coaches may not:

- s Transport, register, or instruct students in grades 7-12 from their attendance zone in non-school baseball, basketball, football, soccer, softball, or volleyball camps (exception: See Section 1209 of the Constitution and Contest Rules).
- s Give any instruction or schedule any practice for an individual or a team during the off-season except during the one in school day athletic period in baseball, basketball, football, soccer, softball, or volleyball
- s Schools and school booster clubs may not provide funds, fees, or transportation for non-school activities.

GENERAL ELIGIBILITY RULES

According to UIL standards, students could be eligible to represent their school in interscholastic activities if they:

- s are not 19 years of age or older on or before September 1 of the current scholastic year. (See Section 446 of the Constitution and Contest Rules for exception).
- s have not graduated from high school.
- s are enrolled by the sixth class day of the current school year or have been in attendance for fifteen calendar days immediately preceding a varsity contest.
- s are full-time students in the participant high school they wish to represent.
- s initially enrolled in the ninth grade not more than four years ago.
- s are meeting academic standards required by state law.
- s live with their parents inside the school district attendance zone their first year of attendance. (Parent residence applies to varsity athletic eligibility only.) When the parents do not reside inside the district attendance zone the student could be eligible if: the student has been in continuous attendance for at least one calendar year and has not enrolled at another school; no inducement is given to the student to attend the school (for example: students or their parents must pay their room and board when they do not live with a relative; students driving back into the district should pay their own transportation costs); and it is not a violation of local school or TEA policies for the student to continue attending the school. Students placed by the Texas Youth Commission are covered under Custodial Residence (see Section 442 of the Constitution and Contest Rules).
- s have observed all provisions of the Awards Rule.
- s have not been recruited. (Does not apply to college recruiting as permitted by rule.)
- s have not violated any provision of the summer camp rule. Incoming 10-12 grade students shall not attend a baseball, basketball, football, soccer, or volleyball camp in which a seventh through twelfth grade coach from their school district attendance zone, works with, instructs, transports or registers that student in the camp. Students who will be in grades 7, 8, and 9 may attend one baseball, one basketball, one football, one soccer, one softball, and one volleyball camp in which a coach from their school district attendance zone is employed, for no more than six consecutive days each summer in each type of sports camp. Baseball, Basketball, Football, Soccer, Softball, and Volleyball camps where school personnel work with their own students may be held in May, after the last day of school, June, July and August prior to the second Monday in August. If such camps are sponsored by school district personnel, they must be held within the boundaries of the school district and the superintendent or his designee shall approve the schedule of fees.
- s have observed all provisions of the Athletic Amateur Rule. Students may not accept money or other valuable consideration (tangible or intangible property or service including anything that is usable, wearable, salable or consumable) for participating in any athletic sport during any part of the year. Athletes shall not receive valuable consideration for allowing their names to be used for the promotion of any product, plan or service. Students who inadvertently violate the amateur rule by accepting valuable consideration may regain athletic eligibility by returning the valuable consideration. If individuals return the valuable consideration within 30 days after they are informed of the rule violation, they regain their athletic eligibility when they return it. If they fail to return it within 30 days, they remain ineligible for one year from when they accepted it. During the period of time from when students receive valuable consideration until they return it, they are ineligible for varsity athletic competition in the sport in which the violation occurred. Minimum penalty for participating in a contest while ineligible is forfeiture of the contest.
- s did not change schools for athletic purposes.

I understand that failure to provide accurate and truthful information on UIL forms could subject the student in question to penalties determined by the UIL.

I have read the regulations cited above and agree to follow the rules.

Date

Signature of student

EMERGENCY INFORMATION

Athlete's Name		Grade	Age	Sex
Student ID#	DOB	Athlete's phone #		
Address:		City		Zip
Parent/Guard.			Relation	
Home #	Cell#	Work #		
Parent/Guard.			Relation	
Home#	Cell#	Work#		
Emergency Contact Name:			Relation	
Home / Cell# :		Language Spoken:		
Heath Insurance Company Name:			HMO	PPO
			(Circle one)	
Allergies:		Medications take regularly:		
ALL Medical Conditions/ Limitations:				

-If, in the judgment of any representative of the school, the above student should need immediate care and treatment as a result of any injury or sickness, I do hereby request, authorize, and consent to such care and treatment as may be given said student by any physician, athletic trainer, nurse, or school representative. I do hereby agree to indemnify and save harmless the school and any school or hospital representative from any claim by any person on account of such care and treatment of said student.

PARENT/ GUARDIAN CONSENT TO ATHLETIC PARTICIPATION FOR A MINOR

The undersigned person individually acknowledges the following:

- I am a parent or guardian of the above named minor, who is a student at Birdville Independent School District.
- I consent to his/her participation in extracurricular sport activities including but not limited to team sports such as football, basketball, soccer, softball, baseball, wrestling, and track and field.
- I am aware that there are inherent risks and dangers of injury for those involved in such sports activities. I recognize that such sport activities are strenuous and may involve intense physical contact. I am also familiar with the general physical conditions of the above named student. In addition, I have reviewed the results of the physical examinations of the student including any examination of a physician required by Birdville ISD for participation in a sport.
- I know of no reason to limit such student's participation in such sports activities except those listed in Medical Conditions/Limitations, on the Medical History, or on the Physical Examination.
- I hereby give my consent for the above student to compete in University Interscholastic League (UIL) approved sports and travel with the coach or other representative of the school on any trips.
- I agree that Birdville ISD may rely on my statements and representations made here and that they shall constitute a bar to claim against Birdville ISD or its employees arising out of the student's participation in such sport activities. I hereby expressly assume the risk of loss resulting from the negligence of the student or from the risks of incident to participation in sports activities.
- I agree to be responsible for the safe return of all athletic equipment issued by the school to the above named student.
- I have read and understand all the University Interscholastic League (UIL) rules and Birdville ISD regulations and agree to follow the rules. By signing this document you also agree to be responsible for the Birdville ISD Honor Code and Code of Conduct found in the Student Handbook. By signing this document I also understand that I am stating that all information given is true to the best of my knowledge.

ALL ATHLETES INVOLVED IN ANY/ALL UIL SPORTS AND THEIR PARENT/GUARDIAN MUST SIGN THISPAGE!!

Please sign to signify that you have read and understand the information on this page:

Student Signature: _____ **Date:** ____/____/____

Parent/Guard. Signature: _____ **Date:** ____/____/____

STANDARD RELEASE FOR FOOTBALL (this paragraph applies to football only)

- This is to certify that I have carefully read and fully understand the warning label(s) attached inside and/or outside of the football helmet that I have checked out from Birdville ISD Athletic Department. The label reads:
WARNING: Do not use this helmet to butt, ram, or spear an opposing player. This is in violation of the football rules and can result in severe head, brain, or neck injury; and paralysis or death to you or to your opponent.
- NO HELMET CAN PREVENT ALL SUCH INJURIES
- There is a risk there injuries may also occur as a result of accidental contact without intent to butt, ram, or spear
- I also understand that football is a potentially injurious sport and agree to accept the risk of injury associated with competition in this sport

INHALER FORMATION ** ONLY required for inhaler******

Dear Parent/Guardian:

For your son/daughter please indicate if your child needs to carry an inhaler: _____yes_____no

- A Physician's signature is required for your child to carry an inhaler

Physician's Signature: _____ **Date:** _____



University Interscholastic League



Parent and Student Agreement/Acknowledgement Form Anabolic Steroid Use and Random Steroid Testing

- Texas state law prohibits possessing, dispensing, delivering or administering a steroid in a manner not allowed by state law.
- Texas state law also provides that body building, muscle enhancement or the increase in muscle bulk or strength through the use of a steroid by a person who is in good health is not a valid medical purpose.
- Texas state law requires that only a licensed practitioner with prescriptive authority may prescribe a steroid for a person.
- Any violation of state law concerning steroids is a criminal offense punishable by confinement in jail or imprisonment in the Texas Department of Criminal Justice.

STUDENT ACKNOWLEDGEMENT AND AGREEMENT

As a prerequisite to participation in UIL athletic activities, I agree that I will not use anabolic steroids as defined in the UIL Anabolic Steroid Testing Program Protocol. I have read this form and understand that I may be asked to submit to testing for the presence of anabolic steroids in my body, and I do hereby agree to submit to such testing and analysis by a certified laboratory. I further understand and agree that the results of the steroid testing may be provided to certain individuals in my high school as specified in the UIL Anabolic Steroid Testing Program Protocol which is available on the UIL website at www.uiltexas.org. I understand and agree that the results of steroid testing will be held confidential to the extent required by law. I understand that failure to provide accurate and truthful information could subject me to penalties as determined by UIL.

Student Name (Print): _____ Grade (9-12) _____

Student Signature: _____ Date: _____

PARENT/GUARDIAN CERTIFICATION AND ACKNOWLEDGEMENT

As a prerequisite to participation by my student in UIL athletic activities, I certify and acknowledge that I have read this form and understand that my student must refrain from anabolic steroid use and may be asked to submit to testing for the presence of anabolic steroids in his/her body. I do hereby agree to submit my child to such testing and analysis by a certified laboratory. I further understand and agree that the results of the steroid testing may be provided to certain individuals in my student's high school as specified in the UIL Anabolic Steroid Testing Program Protocol which is available on the UIL website at www.uiltexas.org. I understand and agree that the results of steroid testing will be held confidential to the extent required by law. I understand that failure to provide accurate and truthful information could subject my student to penalties as determined by UIL.

Name (Print): _____

Signature: _____ Date: _____

Relationship to student: _____

School Year (to be completed annually) _

BISD Concussion Management Program

Academic Accommodation Recommendations

The following academic accommodations may help in reducing the cognitive (thinking) load, thereby minimizing post-concussion symptoms and allowing the student to better participate in the academic process during the injury period. Needed accommodations may vary by course. This information and recommendations are from the ImPACT® Concussion Testing Program being used by BISD.

Note taking: Allow student to obtain class notes or outlines ahead of time to aid organization and reduce multi-tasking demands. If this is not possible, allow the student photocopied notes from another student.

Note taking may be difficult due to impaired multitasking abilities and increased symptoms.

Workload Reduction: Reduce overall amount of make-up work, class work, and homework (we typically recommend 50-75%, though may vary by class), shorten tests and projects. Examples: reduce the length of essays, have student do every other problem in a homework assignment, or highlight key concept areas for testing while eliminating testing on less important topics.

It takes a concussed student much longer to complete assignments due to the increased memory problems and decreased speed of learning. Recovery can be delayed when a student “pushes through” symptoms. Therefore, it is recommended that “thinking” or cognitive load be reduced, just like physical exertion is reduced.

Breaks: Take breaks as needed to control symptom levels. Example: student may lay head on the desk to rest. For worse symptoms, the student may need to leave class and go to the nurse. The nurse will inform the Athletic Trainers. The student may also be allowed to call the training room directly from your class room if he or she has permission and you allow.

Extra time: Allow student to turn in assignments late

Students may experience severe symptoms some day/nights and not others. With increased symptoms, students are advised to rest, and therefore may need to turn in assignments late on occasion.

Testing: extra time to complete tests, testing in a quiet environment, allow testing in multiple sessions, reduce length of tests, and eliminate tests when possible

Students with concussions have increased memory and attention problems. They will not be able to learn as effectively or quickly as before. Furthermore, highly demanding activities like testing can significantly raise symptoms (e.g. headache, fatigue) which can in turn make testing more difficult.

If at any time you feel that the student is abusing their privileges please let one of the Coaches know immediately.

If the doctor prescribes specific accommodations from this list you will receive a copy.

BISD Concussion Management Program

Physician Protocol Information Sheet

Patient Name: _____

Date of Injury: _____

Name of Doctor: _____

Date of Evaluation: _____

Once the athlete is cleared by a physician to return to physical activity the athlete will be put through the following exertional levels by the Athletic Trainer before returning to play. Once the athlete has completed all 3 levels with no returning post-concussion symptoms the Athletic Trainer will allow the athlete to participate.

Return To Play Protocol - Examples of Exertional Levels

Light Levels (day 1): walking, light jogging, light-intensity stationary bike, light-intensity weightlifting (lower weight, higher reps, no bench no squat)

Moderate Levels (day 2): moderate jogging/brief running, moderate-intensity stationary biking, moderate-intensity weightlifting (reduced time and/or reduced weight from typical routine), moderate-intensity swimming

Heavy Levels (day 3): sprinting/running, high-intensity stationary biking, regular weightlifting routine, non-contact sport-specific drills (in 3 planes of movement), high-intensity swimming

***** CAUTION:** If the athlete experiences a reoccurrence of ANY post-concussion symptoms during or after exercising, he or she will cease activity immediately and rest. He or she may resume activity at a lower level the following day if symptom-free, beginning the progression again.

Parent :

Printed name: _____ signature: _____ date: _____

Physician:

Printed name: _____ signature: _____ date: _____

******* A separate note from the physician's office clearing the athlete for participation is

required before the athlete may begin the Return To Play Protocol - Exertional Levels.

BISD Concussion Management Program

Middle School Check List

Student's Name: _____

Date of Injury: _____

Injury Description: _____

Parent Name: _____

Phone #: _____

Insurance Co.: _____

School: _____

Sport: _____

- Informed Athletic Trainer, _____, within 24 hours of injury
- Student's teachers, school counselor, school nurse, and Administration have been informed of classroom adjustments if needed

Student has been evaluated by **Jason F. Wander, DO** or **Dr. Michele Kirk, MD** (circle one), and

The treating physician's completed form is on file

Student has been evaluated by a different physician, **name:** _____, and

BISD Concussion Management Form has been completed by the parent and the treating physician

The treating physician's completed form is on file

Student has successfully completed the Return to Play protocol

UIL Concussion Management Protocol Return to Play Form has been completed

Return to Play Date: _____

Supervising Coach: _____

POST-CONCUSSION SYMPTOM SCALE

Please use the following scale to rate each symptom:

NONE

MILD

MODERATE

SEVERE

0

1

2

3

4

5

6

SYMPTOMS	SEVERITY RATING													
	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:	Date:
Headache														
Nausea														
Vomiting														
Balance Problems														
Dizziness (spinning or movement sensation)														
Lightheadedness														
Fatigue														
Trouble falling asleep														
Sleeping more than usual														
Sleeping less than usual														
Drowsiness														
Sensitivity to light														
Sensitivity to noise														
Irritability														
Sadness														
Nervous/Anxious														
Feeling more emotional														
Numbness or tingling														
Feeling slowed down														
Feeling like "in a fog"														
Difficulty concentrating														
Difficulty remembering														
Visual problems														
Other														
TOTAL														



Concussion Management Protocol Return to Play Form

This form must be completed and submitted to the athletic trainer or other person (who is not a coach) responsible for compliance with the Return to Play protocol established by the school district Concussion Oversight Team, as determined by the superintendent or their designee (see Section 38.157 (c) of the Texas Education Code).

Student Name (Please Print)

School Name (Please Print)

Designated school district official verifies:

Please Check

- The student has been evaluated by a treating physician selected by the student, their parent or other person with legal authority to make medical decisions for the student.
- The student has completed the Return to Play protocol established by the school district Concussion Oversight Team.
- The school has received a written statement from the treating physician indicating, that in the physician's professional judgment, it is safe for the student to return to play.

School Individual Signature

Date

School Individual Name (Please Print)

Parent, or other person with legal authority to make medical decisions for the student signs and certifies that he/she:

Please Check

- Has been informed concerning and consents to the student participating in returning to play in accordance with the return to play protocol established by the Concussion Oversight Team.
- Understands the risks associated with the student returning to play and will comply with any ongoing requirements in the return to play protocol.
- Consents to the disclosure to appropriate persons, consistent with the Health Insurance Portability and Accountability Act of 1996 (Pub. L. No. 104-191), of the treating physician's written statement under Subdivision (3) and, if any, the return to play recommendations of the treating physician.
- Understands the immunity provisions under Section 38.159 of the Texas Education Code.

Parent/Responsible Decision-Maker Signature

Date

Parent/Responsible Decision-Maker Name (Please Print)



CONCUSSION ACKNOWLEDGEMENT FORM

Name of Student _____

Definition of Concussion - means a complex pathophysiological process affecting the brain caused by a traumatic physical force or impact to the head or body, which may: (A) include temporary or prolonged altered brain function resulting in physical, cognitive, or emotional symptoms or altered sleep patterns; and (B) involve loss of consciousness.

Prevention – Teach and practice safe play & proper technique.

- Follow the rules of play.
- Make sure the required protective equipment is worn for all practices and games.
- Protective equipment must fit properly and be inspected on a regular basis.

Signs and Symptoms of Concussion – The signs and symptoms of concussion may include but are not limited to: Head ache, appears to be dazed or stunned, tinnitus (ringing in the ears), fatigue, slurred speech, nausea or vomiting, dizziness, loss of balance, blurry vision, sensitive to light or noise, feel foggy or groggy, memory loss, or confusion.

Oversight - Each district shall appoint and approve a Concussion Oversight Team (COT). The COT shall include at least one physician and an athletic trainer if one is employed by the school district. Other members may include: Advanced Practice Nurse, neuropsychologist or a physician’s assistant. The COT is charged with developing the Return to Play protocol based on peer reviewed scientific evidence.

Treatment of Concussion - The student-athlete shall be removed from practice or competition immediately if suspected to have sustained a concussion. Every student-athlete suspected of sustaining a concussion shall be seen by a physician before they may return to athletic participation. The treatment for concussion is rest. Also avoid external stimulation such as watching television, music, use of computer, and bright lights. When all signs and symptoms of concussion have cleared and the student has received written clearance from a physician, the student-athlete may begin their district’s Return to Play protocol as determined by the Concussion Oversight Team.

Return to Play - According to the Texas Education Code, Section 38.157:

A student removed from an interscholastic athletics practice or competition under Section 38.156 may not be permitted to practice or compete again following the force or impact believed to have caused the concussion until:

- (1) the student has been evaluated, using established medical protocols based on peer-reviewed scientific evidence, by a treating physician chosen by the student or the student’s parent or guardian or another person with legal authority to make medical decisions for the student;
- (2) the student has successfully completed each requirement of the return-to-play protocol established under Section 38.153 necessary for the student to return to play;
- (3) the treating physician has provided a written statement indicating that, in the physician’s professional judgment, it is safe for the student to return to play; and
- (4) the student and the student’s parent or guardian or another person with legal authority to make medical decisions for the student:
 - (A) have acknowledged that the student has completed the requirements of the return-to-play protocol necessary for the student to return to play;
 - (B) have provided the treating physician’s written statement under Subdivision (3) to the person responsible for compliance with the return-to-play protocol under Subsection (c) and the person who has supervisory responsibilities under Subsection (c); and
 - (C) have signed a consent form indicating that the person signing:
 - (i) has been informed concerning and consents to the student participating in returning to play in accordance with the return-to-play protocol;
 - (ii) understands the risks associated with the student returning to play and will comply with any ongoing requirements in the return-to-play protocol;
 - (iii) consents to the disclosure to appropriate persons, consistent with the Health Insurance Portability and Accountability Act of 1996 (Pub. L. No. 104-191), of the treating physician’s written statement under Subdivision (3) and, if any, the return-to-play recommendations of the treating physician; and
 - (iv) understands the immunity provisions under Section 38.159.

Parent or Guardian Signature

Date

Student Signature

Date

SAMPLE

BIRDVILLE INDEPENDENT SCHOOL DISTRICT ATHLETIC PAY VOUCHER

JOB # 52802

(PLEASE PRINT)

GAME DATE _____

NAME _____

SOCIAL SECURITY # _____

ADDRESS _____

PHONE # _____

CITY/STATE/ZIP _____

EMPLOYEE ID # _____

(Check One)	JOB DESCRIPTION	
<input type="checkbox"/> Official	<input type="checkbox"/> Spotter	<input type="checkbox"/> Car Parker Mgr.
<input type="checkbox"/> Clock/Scoreboard	<input type="checkbox"/> Ticket Mgr.	<input type="checkbox"/> Car Parker
<input type="checkbox"/> Matrix	<input type="checkbox"/> Ticket Seller	<input type="checkbox"/> Linesperson
<input type="checkbox"/> Asst. Matrix	<input type="checkbox"/> Gate	
<input type="checkbox"/> Message Center	<input type="checkbox"/> Security	<input type="checkbox"/> Other _____
<input type="checkbox"/> Announcer	<input type="checkbox"/> Chain Crew	

(Check One)	SPORT
<input type="checkbox"/> Football	<input type="checkbox"/> Baseball
<input type="checkbox"/> Volleyball	<input type="checkbox"/> Softball
<input type="checkbox"/> Basketball	<input type="checkbox"/> Track
<input type="checkbox"/> Soccer	<input type="checkbox"/> Gymnastics
<input type="checkbox"/> Wrestling	<input type="checkbox"/> Tennis

*****OFFICE USE ONLY*****

REQ. # _____

VENDOR # _____

ACCOUNT # _____

AMOUNT \$ _____

MUST BE COMPLETED FOR PAYMENT

GRADE LEVEL _____ #GAMES _____

_____ vs. _____

(Home Team) (Opponent)

MILEAGE _____ HOURS _____

COACH'S SIGNATURE _____

WHITE COPY: Business Office

YELLOW COPY: Athletic Office

PINK COPY: Payee



B I R D V I L L E I N D E P E N D E N T S C H O O L D I S T R I C T

Athletics Injury and Treatment Report

Date _____ Campus _____

Coach _____ Sport _____

Athlete's Name _____

Classification (Check One) 7 8 9 10 11 12

Parent(s) Name _____ Address _____

Parent(s) Phone # _____ Date of Injury _____

Site of Injury _____ Time _____ am pm

Describe Injury _____

FIRST AID GIVEN AT TIME OF INJURY (Check): Ice Compression Splinted Dressing
 Stretcher Other _____

REFERRED TO DOCTOR Yes No BY WHOM? Parent Coach Not at this time

WAS PARENT NOTIFIED? Yes No

NAME OF COACH REPORTING _____



Submit Form

Clear Form



Middle School

GAME REPORT FORM

TO BE FILLED OUT AFTER EACH CONTEST
BY BOTH HOME TEAM AND VISITING TEAM.

Date of Contest: _____ Location: _____

Sport: _____

Grade: _____ Boys Girls

Home Team: _____

Visiting Team: _____

Who Won? _____ Score: _____

Did everyone play? Yes No

Coach's Name Reporting: _____

Check type of game: Metroplex Mid-City District Tournament Championship

Comments/Notes:



Middle School

FINAL TEAM REPORT

Year _____

School: _____

Sport: _____ Boys Girls

Home Team: _____

Number of Participants

8th Grade _____

7th Grade _____

TOTAL: _____

Number of athletes in program at beginning of season. _____

Estimate of the number that will continue in this sport next year. _____

RECORD Won _____ Lost _____



B I R D V I L L E I N D E P E N D E N T S C H O O L D I S T R I C T

Beginning of Season Participation Record

Year _____

School: _____

Sport: _____ D Boys D Girls

Home Team: _____

Number of Participants

VARSITY

JV

9th

8th

7th

Submit Form

Clear Form





B I R D V I L L E I N D E P E N D E N T S C H O O L D I S T R I C T

End of Season Participation Record

Year _____

School: _____

Sport: _____

Number of Participants

	Boys	Girls
VARSITY	_____	_____
JV	_____	_____
9 th	_____	_____
TOTAL	_____	_____

Number of athletes in program at beginning season. _____

Estimate of the number that will continue in this sport next year. _____





B I R D V I L L E I N D E P E N D E N T S C H O O L D I S T R I C T

Scouting Report

The following expenses were incurred by _____
Name

while scouting for _____ on _____
School Date

Names of all persons accompanying you on trip:

Notes/Comments: