

INTERSCHOLASTIC ATHLETICS EMERGENCY CARE CARD

Student's Name _____ Age _____ Grade _____
 Birthdate _____
 Parent's Name (Please Print) _____ Phone _____
 Parent's Address _____
 Accident Insurance Co _____
 Doctor's Name _____ Phone _____
 Hospital Name _____ Phone _____
 In case my child (or ward) is injured in interscholastic athletics, the coach and medical facility have my authorization to have the student treated

DATE _____ PARENT SIGNATURE _____
 SEC-84 rev 2/89 (COMPLETE IN INK ONLY)

Allergies to Medications _____
 Medications Used Regularly _____
 Past or Present Medical Problems _____
 Past Surgeries _____
 Previous Head, Neck, or Back Injury _____
 Contact Lenses/Orthodontic Appliances? _____
 Last Tetanus Booster Shot (Month/Year) _____
 Comments: _____

**ATHLETIC DEPARTMENT
 LOMPOC HIGH SCHOOL**

515 West College Avenue, Lompoc, California 93436, Telephone (805) 742-3073

STANDARD ATHLETIC AGREEMENT

TO: All Athletes and their parents
 FROM: The Athletic Department and Lompoc High School Administration

You have indicated that you would like to participate in the interscholastic sports program at Lompoc High School. We are happy that you are interested in this program for we believe that participation in a well conducted athletic program has real value for you.

We believe that the following training rules and regulations will lead to better conditioning, better spirit and better achievement. Since you participate in team sports entirely on a voluntary basis, you do so with the understanding that these rules will be observed for the entire season, which begins with the first day of practice and concludes with the last regularly scheduled contest or the last C.I.F. Play-off contest in which the team participates.

1. Possession or use of **ALCOHOLIC BEVERAGES** in any form is **PROHIBITED**.
2. Possession or use of **TOBACCO PRODUCTS** in any form is **PROHIBITED**.
3. Possession or use of any **SUBSTANCE OF ABUSE** or substances commonly identified as "**DRUGS**" is **PROHIBITED**.
4. **STEALING** (of Lompoc High School equipment, of opponent school's equipment, from teammates, etc.) or **ABUSE OF SCHOOL PROPERTY IS PROHIBITED**. In addition, **LOST** athletic gear must be **PAID FOR BEFORE** an athlete receives any awards or is **ELIGIBLE** to compete in a subsequent sport.
5. **PROFANITY** is **PROHIBITED**. Vulgar and obscene language has no place in athletics.
6. **PUNCTUALITY** and **REGULAR ATTENDANCE** is **REQUIRED**. Absences from practices, team meetings, conditioning sessions, trips, competitions or school, for reasons other than the **EXCUSED ABSENCES** listed in the Parent/Student Handbook, must be authorized In Advance through the Athletic Director's Office or by an Administrator. However, these authorized absences will be limited to three periods on the day of a contest or the day after a contest. **PUNCTUALITY** also applies to all practices, meetings, conditioning sessions, trips, competition, and school attendance.
7. **RESPECT** for coaches, teachers, fellow athletes, opponents, officials and fans is **REQUIRED!** Fair play and good sportsmanship is expected and required of athletes at all times!

My parents and I have read and understand the above rules and regulations. We agree that they are reasonable and, as a Lompoc High School athlete, I agree to abide by them, and also to abide by any additional rules and team policies of my particular sport.

Signature of athlete _____ Date _____
 Signature of parent or guardian _____ Date _____

NAME OF SPORT(S) _____