

**STUDENT ACTIVITIES/ATHLETIC  
HANDBOOK**

**WEST VALLEY SCHOOL DISTRICT #1  
Kalispell, MT**



**WEST VALLEY SCHOOL DISTRICT STUDENT ACTIVITIES-ATHLETIC HANDBOOK 2023-2024**

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## WEST VALLEY SCHOOL DISTRICT #1 ACTIVITIES-ATHLETIC HANDBOOK 2023-2024

West Valley School District #1 will make equal educational opportunities available for all students without regard to race, color, national origin, ancestry, sex, ethnicity, language barrier, religious belief, physical or mental handicap or disability, economic or social condition, or actual or potential marital or parental status. **(School Board Policy 3210)**

### **DIRECTORY INFORMATION**

Regarding student records, federal law requires that “directory information” on a child may be released by the District to anyone who requests it unless the parent/guardian/caretaker relative objects in writing to the release of the information. This includes release of directory information to post secondary institutions and military recruiters. Directory information policy explanation can be found in the Student Handbook. Please make sure a parent/guardian/caretaker relative completes the Student Directory Information Notification as found in the Student Handbook.

### **REQUIREMENTS**

All students participating in extracurricular activities must have the following prior to the first practice:

- A required physical documented on the official Montana High School Association (MHS) Physical Form - for athletics
- An Assumption of Risk and Medical Insurance statement and Medical Treatment Release Form signed by the parent.
- A Permission to Participate Registration form signed by the parent.
- A Concussion Education and Compliance form signed by the student athlete and parent.

### **PURPOSE**

The purpose of this guide is to establish rules, procedures, policies, and philosophy as it pertains to the West Valley School District #1 Athletic and Activities Programs. The fundamental purpose of the athletic/activities program is to facilitate development of:

- Sportsmanship,
- A sense of responsibility to themselves and others,
- A devotion to an athletic and/or activities assignment,
- Pride of accomplishment of a job done to the best of one’s ability,
- Sense of belonging to a group,
- Social values derived from contact with students and adults from other communities and
- Healthy behaviors of participants.

### **GENERAL INFORMATION RELATING TO POLICIES**

#### **1. Academic Eligibility for Participation**

West Valley School will follow the eligibility rules as set forth by the Student Handbook and District Board Policy:

- West Valley School Requirement:** A student must meet the work ethic and academic expectations of their teachers. This includes work completion and classroom participation. Failure to do so will result in the student receiving a Novice (N) or Failing (F) grade in work ethic and/or category of such. If the student earns this grade, the teacher will notify participant and parent that the student will become ineligible. Academically ineligible participants will be expected to practice, but will not be allowed to participate in games, meets, or performances or travel with the team or group.

**b. Weekly Grade Notification Policy:** The Activities Office will be notified on the eligibility report by teachers every Thursday during the season of any student athletes that are ineligible by grades. If a participant appears on this report the Activities Office will notify Head Coaches and parents by Friday that the student is ineligible for the following week. The student will be ineligible for participation in any activities for the entire following week. Students and parents should continually monitor Infinite Campus so they are aware of what their student athlete's grades or missing assignments are in each class.

**2. Behavior Eligibility for Participation**

West Valley School will follow the eligibility rules as set forth by the Student Handbook and District Board Policy:

**a. West Valley School Requirement:** A student may be ineligible due to a failure to meet the behavior expectations set forth in the student handbook and District Policy.

**3. Participation in District Extracurricular Activities by Unenrolled Children**

- a. Any child who is a resident of the District who is attending a nonpublic or home school meeting the requirements of Section 20-5-109, MCA:
  - i. Is eligible to seek to participate in any extracurricular activity of the District that is offered to pupils of the district who are of the same age.
  - ii. Is subject to the same standards for participation as those required of full-time pupils enrolled in the school and the same rules of any interscholastic organization of which the school of participation is a member as specified in Section 3.a. and 3.b. of this policy and any related student or activity handbook provisions.
- b. In cases where there is more than one school serving the same age group within District boundaries, a child participating under this provision shall be subject to the same school zone rules applicable to full-time pupils of the District. Participation for one school for one sport and another school for another sport is prohibited.
- c. The academic eligibility for extracurricular participation for a student attending a nonpublic school as specified under this provision shall be attested by the head administrator of the nonpublic school. No further verification shall be required.
- d. The academic eligibility for extracurricular participation for a student attending a home school as specified under this provision shall be attested in writing by the educator providing the student instruction with verification by the school principal for the school of participation. The verification may not include any form of student assessment.
- e. Students participating in extracurricular activities under this provision may be considered part time enrollees for purposes of ANB in accordance with Policy 3150, 3121, and 3121P.

**4. Grade Level Participation**

West Valley School District #1 offers the following athletic programs:

Football	Grades 7 & 8	End of August to Mid October
Girls Volleyball	Grades 7 & 8	End of August to Mid October
Boys Basketball	Grades 5 - 8	Mid October to Mid December
Girls Basketball	Grades 5 - 8	Beginning of January to Mid March
Cross Country	Grades K - 8	Mid March to Mid May

## **5. Activities Philosophy**

### ACTIVITIES PHILOSOPHY

It is our philosophy that participation in co-curricular activities is an integral and vital part of the total educational program.

The clubs, activities, and athletics provided by West Valley School District No. 1 shall afford opportunities for students to involve themselves outside the classroom. Besides providing these programs, the District encourages student involvement because it benefits both the individual student and the school. The student derives cooperation, dedication, personal pride and ownership, sense of purpose, enhanced self-worth, loyalty, success and recognition, physical and social development, and a wholesome use of time.

Student interest leads to pride in school, citizenship, leadership, democratic experience, and character development. Teamwork, sportsmanship, and respect for others' rights and views are advanced.

Therefore, we believe it is the responsibility of the District to identify and maintain a mix of activities that motivates an optimum number of students without encroaching on one another. It is further incumbent upon the District to encourage participation by students for the above-mentioned reasons and their synergistic effect on the school community.

Finally, we believe that these activities are not an end in themselves, but vehicles to work with students. We want to "win" not for "winning's sake," but because the desire to excel is a worthwhile lifetime goal. We do not subscribe to a "winning at all costs" philosophy. We value the importance of good sportsmanship, giving one's best effort, winning humbly, and losing with grace. We believe it is not the score that makes one a "winner" or a "loser".

## **6. Accident Report Form and Procedure**

**Injuries:** All injuries are to be reported immediately to the coach/advisor/activity director regardless of the nature of the injury. The coach/advisor/director will fill out an accident report form and file it in the District office within one (1) school day of the accident.

## **7. Assumption of Risk Statement**

**Liability:** The coach/advisor/director, any other member of the school staff, or any member of the Board of Trustees will not be held liable or responsible in case of an accident incurred during practice, games, meets, matches, tournaments, concerts, or trips supervised by West Valley Public Schools. Each parent or guardian will be responsible to sign an "assumption of risk" statement indicating that the parents/guardians assume all risks for injuries resulting from such participation. [Board Policy 2151]

## **8. Attendance the Day of an Activity**

**School Absences:** Absences from school and participation in practices, games, meets or performances.

- If you are absent from school for a school sponsored event you can practice, play in a game, or take part in a performance that day.
- If you are absent from school for a half of a school day or less for a medical, dental, optometrist, etc. appointment you can participate with approval from the administration (principal, vice principal, or the activities director). A written excuse from the doctor may be required.
- You may attend practice, play in games, or participate in performances with administrative approval

if absent for a court appearance, bereavement, a family emergency, or some other reason deemed acceptable by the administration.

- If you are home sick and do not come to school for half of the day or are absent for half of a day (excused or unexcused) you cannot practice, play, or participate in performances. It is not in the best interest of our participants to be practicing when sick.
- If you are in school but are absent from any class for reasons deemed unexcused, you may not participate in games, practices, or performances that day.

**School Suspension:** School suspension means the exclusion of a student from attending individual classes or school **and participating in school activities** for an initial period not to exceed ten (10) school days. This will be treated as an unexcused absence from the activity. [School Board Policy 3300]

## **9. Bullying, Harassment, Intimidation, Hazing Policy**

### **HAZING, BULLYING, HARASSMENT & INTIMIDATION**

The Board will strive to provide a positive and productive learning and working environment. Bullying, harassment, intimidation, or hazing, by students, staff, or third parties, is strictly prohibited and shall not be tolerated. **(School Board Policy 3226)**

1. "Hazing" includes but is not limited to any act that recklessly or intentionally endangers the mental or physical health or safety of a student for the purpose of initiation or as a condition or precondition of attaining membership in or affiliation with any District-sponsored activity or grade-level attainment, including but not limited to forced consumption of any drink, alcoholic beverage, drug, or controlled substance, forced exposure to the elements, forced prolonged exclusion from social contact, sleep deprivation, or any other forced activity that could adversely affect the mental or physical health or safety of a student; requires, encourages, authorizes, or permits another to be subject to wearing or carrying any obscene or physically burdensome article, assignment of pranks to be performed, or other such activities intended to degrade or humiliate.
2. "Bullying" means any harassment, intimidation, hazing, or threatening, insulting, or demeaning gesture or physical contact, including any intentional written, verbal, or electronic communication ("cyberbullying") or threat directed against a student that is persistent, severe, or repeated, and that substantially interferes with a student's educational benefits, opportunities, or performance, that takes place on or immediately adjacent to school grounds, at any school-sponsored activity, on school-provided transportation, at any official school bus stop, or anywhere conduct may reasonably be considered to be a threat or an attempted intimidation of a student or staff member or an interference with school purposes or an educational function, and that has the effect of:
  - a. Physically harming a student or damaging a student's property;
  - b. Knowingly placing a student in reasonable fear of physical harm to the student or damage to the student's property;
  - c. Creating a hostile educational environment, or;
  - d. Substantially and materially disrupts the orderly operation of a school.
3. "Electronic communication device" means any mode of electronic communication, including but not limited to computers, cell phones, PDA, social media or the internet.

### **Reporting**

All complaints about behavior that may violate this policy shall be promptly investigated. Any student, employee, or third party who has knowledge of conduct in violation of this policy or feels he/she has been a victim of hazing, harassment, intimidation, or bullying in violation of this policy is encouraged to immediately report his/her concerns to the building principal or the District Administrator, who have overall responsibility for such investigations. A student may also report concerns to a teacher or counselor, who will be responsible for notifying the appropriate District official. Complaints against the

building principal shall be filed with the Superintendent. Complaints against the Superintendent or District Administrator shall be filed with the Board.

#### Exhaustion of Administrative Remedies

A person alleging violation of any form of harassment, intimidation, hazing, or threatening, insulting, or demeaning gesture or physical contact, including any intentional written, verbal, or electronic communication, as stated above, may seek redress under any available law, either civil or criminal, after exhausting all administrative remedies.

#### **SEX BASED DISCRIMINATION AND TITLE IX**

The District encourages staff, parental, and student support in its efforts to address and prevent sexual harassment and sexual discrimination in the public schools. Students and/or parents will discuss their questions or concerns about the expectations in this area with the superintendent who serves as the District Title IX coordinator.

For purposes of this section and the grievance process, "sexual harassment" means conduct on the basis of sex that satisfies one or more of the following:

- A District employee conditioning the provision of an aid, benefit, or service of the District on an individual's participation in unwelcome sexual conduct;
- Unwelcome conduct determined by a reasonable person to be so severe, pervasive and objectively offensive that it effectively denies a person equal access to the District's education program or activity or;
- "Sexual assault" as defined in 20 USC 1092(f)(6)(A)(v), "dating violence" as defined in 34 USC 12291(a)(10), "domestic violence" as defined in 34 USC 12291(a)(8) or "stalking" as defined in 34 USC 12291(a)(30).

All students are expected to treat other students and District employees with courtesy and respect; to avoid any behaviors known to be offensive; and to stop these behaviors when asked or told to stop. A substantiated complaint against a student or staff member will result in appropriate disciplinary action, according to the nature of the offense. Supportive measures are available to parties involved in Title IX investigations.

The District will notify the parents of all students involved in sexual harassment by student(s) and will notify parents of any incident of sexual harassment or sexual discrimination by an employee. To the greatest extent possible, complaints will be treated as confidential. Limited disclosure may be necessary to complete a thorough investigation.

A complaint alleging sexual harassment by another student or sexual harassment or sexual discrimination by a staff member may be presented by a student and/or parent in a conference with the Title IX coordinator. The parent or other advisor may accompany the student throughout the complaint process. The conference will be scheduled and held as soon as possible. The District will conduct an appropriate investigation in accordance with Policy 3225 and 3225P. The student will not be required to present a complaint to a person who is the subject of the complaint.

If the resolution of the complaint is not satisfactory the decision may appeal in accordance with Policy 3225P.

For more information about the District's complaint procedure, see Policy 3225, 3225P, 3225F.

## **10. Cell phone use by students**

### **Cell Phones and Other Electronic Equipment (Students)**

Student possession and use of cellular phones, and other electronic mobile devices on school grounds, at school-sponsored activities, and while under the supervision and control of District employees is a privilege which will be permitted only under the circumstances described by the Student Handbook and as permitted by school-sponsored activity coach/coordinator. At no time, will any student operate a cell phone or other electronic mobile devices with video capabilities in a locker room, bathroom, or other location where such operation may violate the privacy right of another person.

## **11. Code of Conduct**

### **Extra - and Co - Curricular Chemical Use Policy**

Students participating in extra- and co-curricular activities, shall not use, have in possession, sell, purchase, or distribute alcohol, tobacco products, alternative nicotine and vapor products, or illegal drugs or abuse prescription or non-prescription drugs during their extracurricular seasons. These rules are in effect twenty-four (24) hours a day. If a student receives a MIP or is seen using tobacco, alcohol, or illicit drugs, the student will forfeit the privilege of participating in accordance with the activities and student handbooks (15 calendar days-including 5 days for practice).

### **Policy Coverage**

This policy applies to all students who are involved in extra- and co-curricular activities programs.

### **Policy Duration**

This policy is in effect each school year from the date of the first practice for fall activities until the last day of school or activities, whichever is later. Violations are cumulative, through the student's period of attendance in grades 6-8 and in grades 9-12. The Administration shall publish the participation rules annually in the activities and student handbooks.

### **Student and Parent/Legal Guardian Due Process**

If a determination is made that a student has violated this policy, the student and parent/guardian shall be notified of the violation by telephone and email. Also at this time, the student and parent or guardian shall be notified of the type of discipline that will be administered or recommended to the Board. Any parent or legal guardian and student who are aggrieved by the imposition of any action (other than a recommendation for exclusion from an activity) shall have the right to an informal conference with the principal, for the purpose of resolving the grievance. At such a conference, the student and the parent shall be subject to questioning by the principal, and shall be entitled to question staff involved in the matter being grieved.

Legal Reference: § 20-5-201, MCA Duties and sanctions

## **14. Code of Ethics**

### **ACTIVITY CODE OF ETHICS:**

It is the duty of everyone involved in school activities, participant or sponsor, to:

- 1) Emphasize the proper ideals of sportsmanship, ethical conduct and fair play.
- 2) Eliminate all possibilities which tend to destroy the best values of the activity.
- 3) Stress the values derived from participating in activities.
- 4) Show cordial courtesy to visitors and officials.
- 5) Respect the integrity and judgment of sports officials.



- 6) Achieve a thorough understanding of the activity and its rules.
- 7) Encourage leadership and good judgment.
- 8) Recognize that the purpose of activities is to promote the physical, mental, social, and emotional well-being of all involved.
- 9) Remember... no competition is a matter of life or death for participants, coach, school, official, fan or community.
- 10) Keep an open line of communication between participant and coach/sponsor.
- 11) Hazing, harassment, bullying, intimidation on the part of students, staff, or a third party (fan or student attending event) will not be tolerated. Activities are an extension of the classroom and a violation will be treated as such and dealt with as stated in the student and staff handbooks.
- 12) Realize that your failure as a student participant to abide by the code of ethics may result in your removal from the event, activity, and/or disciplinary action.

## **12. Concussion Education and Compliance**

**Concussion Form:** All participants and their parent/guardian must initial all the required information on the concussion form and have it completed before the student may begin practice.

# A Fact Sheet for **ATHLETES**

### **WHAT IS A CONCUSSION?**

A concussion is a brain injury that:

- Is caused by a bump or blow to the head
- Can change the way your brain normally works
- Can occur during practices or games in any sport
- Can happen even if you haven't been knocked out
- Can be serious even if you've just been "dinged"

### **WHAT ARE THE SYMPTOMS OF A CONCUSSION?**

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Bothered by light
- Bothered by noise
- Feeling sluggish, hazy, foggy, or groggy

Difficulty paying attention

- Memory problems
- Confusion
- Does not "feel right"

### **WHAT SHOULD I DO IF I THINK I HAVE A CONCUSSION?**

- **Tell your coaches and your parents.** Never ignore a bump or blow to the head even if you feel fine. Also, tell your coach if one of your teammates might have a concussion.

- **Get a medical checkup.** A doctor or health care professional can tell you if you have a concussion and when you are OK to return to play.
- **Give yourself time to get better.** If you have had a concussion, your brain needs time to heal. While your brain is still healing, you are much more likely to have a second concussion. Second or later concussions can cause damage to your brain. It is important to rest until you get approval from a doctor or health care professional to return to play.

**HOW CAN I PREVENT A CONCUSSION?** Every sport is different, but there are steps you can take to protect yourself.

- Follow your coach's rules for safety and the rules of the sport.
- Practice good sportsmanship at all times.
- Use the proper sports equipment, including personal protective equipment (such as helmets, padding, shin guards, and eye and mouth guards). In order for equipment to protect you, it must be:
  - > The right equipment for the game, position, or activity
  - > Worn correctly and fit well
  - > Used every time you play

# A Fact Sheet for PARENT

## WHAT IS A CONCUSSION?

A concussion is a brain injury. Concussions are caused by a bump or blow to the head. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

You can’t see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

## WHAT ARE THE SIGNS AND SYMPTOMS OF A CONCUSSION?

**Signs Observed by Parents or Guardians** *If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs and symptoms of a concussion:*

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Ensure that they follow their coach’s rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity (such as helmets, padding, shin guards, and eye and mouth guards). Protective equipment should fit properly, be well maintained, and be worn consistently and correctly.
- Learn the signs and symptoms of a concussion.

## WHAT SHOULD YOU DO IF YOU THINK YOUR CHILD HAS A CONCUSSION?

**1. Seek medical attention right away.** A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to sports.

**2. Keep your child out of play.** Concussions take time to heal. Don’t let your child return to play until a health care professional says it’s OK. Children who return to play too soon—while the brain is still healing—risk a greater chance of having a second concussion. Second or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

**3. Tell your child’s coach about any recent concussion.** Coaches should know if your child had a recent concussion in ANY sport. Your child’s coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

- Is unsure of game, score, or opponent
  - Moves clumsily
  - Answers questions slowly
  - Loses consciousness (even briefly)
  - Shows behavior or personality changes
  - Can’t recall events prior to hit or fall
  - Can’t recall events after hit or fall
- Symptoms Reported by Athlete**
- Headache or “pressure” in head
  - Nausea or vomiting
  - Balance problems or dizziness
  - Double or blurry vision
  - Sensitivity to light
  - Sensitivity to noise
  - Feeling sluggish, hazy, foggy, or groggy
  - Concentration or memory problems
  - Confusion
  - Does not “feel right”

## HOW CAN YOU HELP YOUR CHILD PREVENT A CONCUSSION?

Every sport is different, but there are steps your children can take to protect themselves from concussion.

Remember, when in doubt, sit them out!  
It's better to miss one game than the whole season.

## Be Prepared

A concussion is a type of traumatic brain injury, or TBI, caused by a bump, blow, or jolt to the head that can change the way your brain normally works. Concussions can also occur from a blow to the body that causes the head to move rapidly back and forth. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious. Concussions can occur in any sport or recreation activity. So, all coaches, parents, and athletes need to learn concussion signs and symptoms and what to do if a concussion occurs.

### SIGNS AND SYMPTOMS OF A CONCUSSION

SIGNS OBSERVED BY PARENTS OR GUARDIANS	SYMPTOMS REPORTED BY YOUR CHILD OR TEEN	
<ul style="list-style-type: none"> <li>•Appears dazed or stunned</li> <li>•Is confused about events</li> <li>•Answers questions slowly</li> <li>•Repeats questions</li> <li>•Can't recall events prior to the hit, bump, or fall</li> <li>•Can't recall events after the hit, bump, or fall</li> <li>•Loses consciousness (even briefly)</li> <li>•Shows behavior or personality changes</li> <li>•Forgets class schedule or assignments</li> </ul>	<p><b><u>Thinking/Remembering:</u></b></p> <ul style="list-style-type: none"> <li>•Difficulty thinking clearly</li> <li>•Difficulty concentrating or remembering</li> <li>•Feeling more slowed down</li> <li>•Feeling sluggish, hazy, foggy, or groggy</li> </ul> <p><b><u>Physical:</u></b></p> <ul style="list-style-type: none"> <li>•Headache or “pressure” in head</li> <li>•Nausea or vomiting</li> <li>•Balance problems or dizziness</li> <li>•Fatigue or feeling tired</li> <li>•Blurry or double vision</li> <li>•Sensitivity to light or noise</li> <li>•Numbness or tingling</li> <li>•Does not “feel right”</li> </ul>	<p><b><u>Emotional:</u></b></p> <ul style="list-style-type: none"> <li>•Irritable</li> <li>•Sad</li> <li>•More emotional than usual</li> <li>•Nervous</li> </ul> <p><b><u>Sleep*:</u></b></p> <ul style="list-style-type: none"> <li>•Drowsy</li> <li>•Sleeps less than usual</li> <li>•Sleeps more than usual</li> <li>•Has trouble falling asleep</li> </ul> <p><i>*Only ask about sleep symptoms if the injury occurred on a prior day.</i></p>

**13. Corporal Punishment (Discipline and Punishment of Pupils M.C.A. 20-4-302)** No District employee or person engaged by the District may inflict, or cause to be inflicted, corporal punishment on a student. Corporal punishment does not include reasonable force District personnel are permitted to use as needed to maintain safety for other students, school personnel, or other persons or for the purpose of self-defense.

#### **14. District/Building General Office Hours**

Generally, Main Office hours are: Monday-Friday, 8:00 A.M. – 3:30 P.M.

#### **15. Dress and Grooming**

##### **Dress for Activities**

Coaches/sponsors/advisors are hereby encouraged and authorized to establish exemplary standards and practices in fashion, grooming and taste that will tend to enhance the appearance of the group as a whole.

Such standards and/or practices must be of a reasonable nature, appropriate to the group's activity and reflect positively on the image of the group and school.

Further, these standards and/or practices must be made known to all potential members at the beginning of the activity season for that group (or sooner if possible).

#### **16. Homeless Student Rights**

Our school and school district provide equal access and comparable services to all students. A homeless student's residence is determined by the residence of the parent/guardian. A homeless student must meet all MHSAs eligibility criteria for participation in any MHSAs sanctioned activity. Contact the school districts Homeless Liaison and Activity Director for further assistance.

Tina Blair

Homeless Liaison

West Valley Public School

2290 Farm To Market Rd

Kalispell, MT 59901

406-755-7239

#### **17. Insurance and Injury**

The School District requires that the parent, guardian, or caretaker relative of students participating in school sponsored activities (co-curricular, extra-curricular, etc.) provide verification of their child's health insurance coverage status. The school district does not provide health insurance to pay for injuries of students while participating in school sponsored activities (extra-curricular, co-curricular, etc.). If the parent, guardian, caretaker relative elects not to provide private health insurance coverage for their child, they are accepting responsibility for any medical expenses incurred by their child in the event they are injured while participating in the school sponsored activities (extra curricular, co-curricular, etc.) that is not the result of fraud, willful injury to a person or property or the willful or negligent violation of a law by a trustee, employee, or agent of the School District.

Also, the School District does not provide student accident insurance coverage for students. Student accident insurance coverage may be purchased by parents through a private company for a fee. Student accident insurance information is distributed at the beginning of the school year and available throughout the year. Please review the information carefully, consider the benefits of such coverage, and complete the application as per instructions. This is an opportunity to provide student accident insurance coverage while your child is at school or participating in activities. A parent seeking coverage must make sure the student accident insurance coverage is in place prior to the first day of practice and/or school. Please contact the coach or athletic director for additional information.

**18. Medical Information Form (Updated Annually)**

MEDICAL TREATMENT/RELEASE FORM

To: Parents and/or Guardians of Students Representing **West Valley School District No. 1** in Activity Programs. It has become exceedingly difficult to obtain medical services for students injured when competing, without first obtaining parental/guardian consent in writing. So that proper emergency assistance may be provided, we ask that you review the following statement, sign and return to the faculty member in charge.

**I hereby authorize West Valley School District No. 1 and its faculty members in charge of my child named below to obtain all necessary medical care for my child and I hereby authorize any licensed physician and/or medical personnel to render necessary medical treatment to my child.**

Print Student's Name: \_\_\_\_\_

Signed: \_\_\_\_\_ (Parent and/or Guardian)

Address \_\_\_\_\_ T

Telephone No. \_\_\_\_\_ Date: \_\_\_\_\_

Emergency Contact (Within 15 miles of name of town)

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

Address: \_\_\_\_\_

Telephone No. \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Allergies? \_\_\_\_\_ YES: \_\_\_\_\_ NO

If "Yes" please list: \_\_\_\_\_

\_\_\_\_\_

Medication Needed: \_\_\_\_\_ YES \_\_\_\_\_ NO

If "Yes" please list: \_\_\_\_\_

\_\_\_\_\_

Special Medical Problems? \_\_\_\_\_ YES \_\_\_\_\_ NO

If "Yes" please list: \_\_\_\_\_

\_\_\_\_\_

We have private health care coverage for our student? \_\_\_\_\_ YES \_\_\_\_\_ NO

### **19. Medication Policy (issuing meds to athletes)**

ADMINISTERING MEDICINES TO STUDENTS (SB Policy 3416 and 3416-F(1))

**West Valley School District No. 1** recommends that medication be given at home whenever possible. Students requiring medication shall be identified by parents and/or physician and will be encouraged to notify the coach/sponsor or Activities Director using the District Health Plan Form. Under no circumstances will school personnel provide aspirin or other patient's medication to students.

### **20. Parent Meeting**

Parents/guardians and students participating in an activity **are required** to attend an informational meeting to discuss and sign the activities policy. Parents are required to attend only one of these meetings per activity, even if they have more than one child participating in that activity. This meeting will be held in the first week of the season. If parents are unable to attend the regularly scheduled meeting, the Parent Meeting Document will be made available.

### **21. Participation Fee (Districts Collection & Tracking)**

A participation fee will be assessed to ALL students participating in school athletics and/or activities. Fees will be approved by the school board and noted on the Registration Form for each activity, when the participant joins their sport/club/group/etc.

**\*\*NOTE\*\*** Any student unable to pay the participation fee due to financial constraints is encouraged to contact the activities director or building principal to make arrangements for an alternative method of payment of fees (ex. installment payments, work/participation, scholarship). It is important to understand that West Valley Public Schools will make every effort to see that no student is eliminated from participation in activities due to financial constraints.

### **22. Physical Exams (MHSA Form)**

MHSA Handbook: ARTICLE II Section (3) Physical Exam

A physical examination is required for each student in order to be considered eligible and to be approved for participation in an Association Contest. Physical examinations must be completed prior to the first day of practice. This examination must be certified by a licensed medical professional acting within the scope and limitations of his/her practice. This certification is valid for a period of one school year. A physical examination conducted before May 1st is not valid for participation the following school year. The physical examination form developed by the MHSA Medical Advisory Committee and approved by the MHSA Executive Board must be used. A current form may be obtained from the school office or from the medical office giving the physical.

A physical examination is required for each student in order to be considered eligible to participate in an association contest. This exam must be certified by a medical doctor for the current school year. (MHSA Handbook Article II Section III). The cost of the physical exam is the responsibility of the student athlete and his/her parents.

### **23. Schools Sponsored Trips**

Student participation on intra and extracurricular trips is subject to eligibility requirements. (See Activity Eligibility.) Students participating in school sponsored trips, whether for the day or overnight, are regarded by West Valley School and the public as representatives of the school system. As representatives of the school system, public image is projected by the conduct, the attitudes and the reputations of those students who take a leading role in intra- and extra-curricular activities. Therefore,

student participants must comply with rules of the school system, the rules of their coaches or advisors, and the civil laws of society.

Student conduct on any school sponsored trip that does not adhere to the reasonable standards established will be dealt with in a timely manner by the coach/advisor and administration. Student misbehavior on school sponsored trips may lead to student suspension from participating in school sponsored trips. Parents will be notified of any incident concerning their child on a school sponsored trip by the coach/advisor and/or administration.

#### **24. Sportsmanship (MHSA Handbook p. 26-27)**

##### **Section (33) SPORTSMANSHIP GUIDELINES**

- A. Statement of philosophy: The Montana High School Association has established policies, expectations and responsibilities which will cultivate the ideals of good sportsmanship. It shall be the responsibility of each member school to ensure that all individuals employed or directly associated with the interscholastic program conduct themselves in a sportsmanlike manner. The coach represents the school at interscholastic athletic activities. It is the responsibility of the head and assistant coaches to serve as role models for students and the public.
- B. Code of Conduct: A coach will be in violation of the standards for good sportsmanship established by the Montana High School Association by:
  - 1. Making degrading/critical remarks about officials during or after a contest either at the competition site, from the bench, in the locker area or through any public news media;
  - 2. Arguing with officials or going through motions indicating dislike/disdain for a decision;
  - 3. Detaining the officials following a contest to request or argue a ruling or explanation of actions by the official;
  - 4. Being ejected from a contest;
  - 5. Physically assaulting an official.

#### **25. Student Sign Out Sheet**

When transportation for an event includes a return to West Valley School, students are not permitted to leave the facility without specific permission from their coach/sponsor in advance of the student's departure. When permission is granted to leave the facility by the coach/sponsor, the parent/guardian of the student(s) must sign out with the coach/sponsor when leaving.

#### **26. Suspension or Exclusion from Team**

Dismissal of any student from a co-curricular activity needs to be brought to the attention of the Activities Director in a timely fashion.

##### **Student and Parent/Legal Guardian Due Process**

If a determination is made that a student has violated this policy, the student and parent/guardian shall be notified of the violation by telephone and email. Also at this time, the student and parent or guardian shall be notified of the type of discipline that will be administered or recommended to the Board.

Any parent or legal guardian and student who are aggrieved by the imposition of any action (other than a recommendation for exclusion from an activity) shall have the right to an informal conference with the principal, for the purpose of resolving the grievance. At such a conference, the student and the parent shall be subject to questioning by the principal, and shall be entitled to question staff involved in the matter being grieved. Legal Reference: § 20-5-201, MCA Duties and sanctions

## **27. Travel Rules, Regulations and Procedure (Parent written request that their child allowed alternative transportation to and/or from site)**

**Travel Requirements:** All participants must travel to and return from all out of town activities with the team unless prior written permission is asked by their parents and granted by the administration.

**Participants will be released to travel with their parent/guardian only, after signing out with their coach/sponsor.**

### **ACTIVITY TRANSPORTATION**

Because of the legal implications regarding school district responsibilities and liability for any student involved as a participant in a school sponsored extracurricular activity, participating students will be required to ride school-sponsored transportation to and from any activity taking place away from Flathead County. This will apply to any student who is a member of a team, music group, cheerleading squad, pep bus or any other school-sponsored activity involving students as assigned participants.

The only exception will be a written request by a parent for their son/daughter to ride with THEM to/from the activity. The parents must SEE the coach/sponsor and sign a release at the time of the request. If for some reason, the parent may want the student to LEAVE an activity with someone other than themselves, a request must be made in writing PRIOR to the scheduled activity and must be pre approved by the activities director or another West Valley Public Schools administrator.

Any person providing transportation for student activity members, with a specific request from the parent as previously outlined, must meet one of the following qualifications:

- 1) An immediate family member; sister/brother, grandparent, and/or adult 21 years or older. This person(s) must SEE the coach/sponsor and sign the student out prior to leaving the activity.

Any participant who arrives late for a coach's/sponsor's announced leave time or arrival time will NOT be allowed to participate in the activity for that day.

## **28. Transporting students with Personal Vehicles**

### **USE OF PRIVATE VEHICLES FOR DISTRICT BUSINESS (SB Policy 8132)**

The use of private vehicles for district business, including the transportation of students, is generally discouraged. Staff members should use district-owned vehicles whenever possible, scheduling activities and other transportation far enough in advance to avoid any non-emergency use of private vehicles. The district discourages use of private vehicles for transport of students. Before transporting any students, the owner of any private vehicle must obtain permission from the Superintendent and provide proof of sufficient liability insurance, current registration and a current Montana driver's license to the District Office. A driver may only transport the number of students as there are seat belts in his/her vehicle.

## **29. Video Surveillance**

The Board authorizes the use of video cameras on District property to ensure the health, welfare, and safety of all staff, students, and visitors to District property and to safeguard District buildings, grounds, and equipment. The Superintendent will approve appropriate locations for video cameras.

The Superintendent will notify staff and students, through staff and student handbooks or by other means, which video surveillance may occur on District property. A notice will also be posted at the main entrance of all District buildings, and on all buses, indicating the use of video surveillance.

The District may choose to make video recordings a part of a student's educational record or of a staff member's personnel record. The District will comply with all applicable state and federal laws related to record maintenance and retention.



## Student-Athlete & Parent/Legal Guardian Concussion Statement

Because of the passage of the Dylan Steigers' Protection of Youth Athletes Act, schools are required to distribute information sheets for the purpose of informing and educating student-athletes and their parents of the nature and risk of concussion and head injury to student athletes, including the risks of continuing to play after concussion or head injury. Montana law requires that each year, before beginning practice for an organized activity, a student-athlete and the student-athlete's parent(s)/legal guardian(s) must be given an information sheet, and both parties must sign and return a form acknowledging receipt of the information to an official designated by the school or school district prior to the student-athletes participation during the designated school year. The law further states that a student-athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from play at the time of injury and may not return to play until the student-athlete has received a written clearance from a licensed healthcare provider.

Student-Athlete Name: \_\_\_\_\_

*This form must be completed for each student-athlete, even if there are multiple student-athletes in each household.*

Parent/Legal Guardian Name(s): \_\_\_\_\_

**We have read the Student-Athlete & Parent/Legal Guardian Concussion Information Sheet.** If true, check box

### After reading the information sheet, I am aware of the following information:

Student Athlete Initials		Parent/Legal Guardian Initials
	A concussion is a brain injury, which should be reported to my parents, my coach(es), or a medical professional if one is available.	
	A concussion can affect the ability to perform everyday activities such as the ability to think, balance, and classroom performance.	
	A concussion cannot be "seen." Some symptoms might be present right away. Other symptoms can show up hours or days after an injury.	
	I will tell my parents, my coach, and/or a medical professional about my injuries and illnesses.	N/A
	If I think a teammate has a concussion, I should tell my coach(es), parents, or licensed healthcare professional about the concussion.	N/A
	I will not return to play in a game or practice if a hit to my head or body causes any concussion-related symptoms.	N/A
	I will/my child will need written permission from a licensed health care professional to return to play or practice after a concussion.	
	After a concussion, the brain needs time to heal. I understand that I am/my child is much more likely to have another concussion or more serious brain injury if return to play or practice occurs before concussion symptoms go away.	
	Sometimes, repeat concussions can cause serious and long-lasting problems.	
	I have read the concussion symptoms on the Concussion fact sheet.	

Signature of Student-Athlete: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

## STUDENTS 3431F **Accident Report**

**This form is to be completed by the appropriate employee(s) as soon as possible after an accident occurs. Please Print or Type.**

District Name \_\_\_\_\_ School Name \_\_\_\_\_  
 Principal's Name \_\_\_\_\_ School Phone \_\_\_\_\_  
 Date of Accident: \_\_\_\_\_ Time: \_\_\_\_\_  AM  PM Supervising Employee \_\_\_\_\_

Claimant's Name \_\_\_\_\_  
*Last Name* *First Name* *Middle Initial*  
 Claimant's Address \_\_\_\_\_  
*City, State ZIP Code*  
 Claimant's SS# \_\_\_\_\_ Home Phone Number (\_\_\_\_\_) \_\_\_\_\_  
 Claimant's Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Grade \_\_\_\_\_  
 Parent's Name (if student) \_\_\_\_\_ Work Phone Number (\_\_\_\_\_) \_\_\_\_\_

<i>Nature of Injury</i>	
<input type="checkbox"/> Scratch	<input type="checkbox"/> Concussion
<input type="checkbox"/> Fracture	<input type="checkbox"/> Head Injury
<input type="checkbox"/> Bruise	<input type="checkbox"/> Sprain/Strain
<input type="checkbox"/> Burn	<input type="checkbox"/> Cut/Puncture
<input type="checkbox"/> Dislocation	<input type="checkbox"/> Bite
<input type="checkbox"/> Other _____	

<i>Place of Accident</i>	
<input type="checkbox"/> Classroom	<input type="checkbox"/> Gymnasium
<input type="checkbox"/> Hallway	<input type="checkbox"/> Parking Lot
<input type="checkbox"/> Bathroom	<input type="checkbox"/> Sidewalk
<input type="checkbox"/> Cafeteria	<input type="checkbox"/> Stairs
<input type="checkbox"/> Playground	<input type="checkbox"/> Athletic Field
<input type="checkbox"/> Other _____	

<i>Body Part Injured</i>		
<input type="checkbox"/> Ankle	<input type="checkbox"/> Foot	<input type="checkbox"/> Leg
<input type="checkbox"/> Arm	<input type="checkbox"/> Face	<input type="checkbox"/> Nose
<input type="checkbox"/> Back	<input type="checkbox"/> Finger	<input type="checkbox"/> Teeth
<input type="checkbox"/> Neck	<input type="checkbox"/> Hand	<input type="checkbox"/> Wrist
<input type="checkbox"/> Eye	<input type="checkbox"/> Knee	<input type="checkbox"/> Shoulder
<input type="checkbox"/> Other _____		

**Describe accident and injury in detail (attach additional description as necessary):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Were efforts made to contact the parent/guardian about the accident?  Yes  No

Was first aid administered?  Yes  No By whom? \_\_\_\_\_

Was the student  Sent home  Sent to physician  Sent to hospital

Is student covered by Student Accident Insurance?  Yes  No If "yes," please list Company Name, address, and phone number \_\_\_\_\_

**If medical or hospital treatment was required, please complete the following information. (Attach a copy of medical bills, if available.)**

Name and address of doctor or hospital \_\_\_\_\_

Witnesses (Name, Address, and Phone) \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
**Signature/Name of Person Completing the Report** **Date**

**TRANSPORTATION RELEASE OF LIABILITY FORM**

Name of the Activity or Event: \_\_\_\_\_

Date of Activity or Event: \_\_\_\_\_

I, **(PARENT AND/OR GUARDIAN)** \_\_\_\_\_

HEREBY ASSUME ALL OF THE RISKS AND RESPONSIBILITY OF THE RELEASED  
**STUDENT/ATHLETE** \_\_\_\_\_ FROM THE RESPONSIBILITY AND CARE OF  
WEST VALLEY SCHOOL.

DATE: \_\_\_\_\_ TIME SIGNED: \_\_\_\_\_

I, **(PARENT AND/OR GUARDIAN)** \_\_\_\_\_

HEREBY ASSUME ALL OF THE RISKS AND RESPONSIBILITY OF THE RELEASED  
**STUDENT/ATHLETE** \_\_\_\_\_ FROM THE RESPONSIBILITY AND CARE OF  
WEST VALLEY SCHOOL.

DATE: \_\_\_\_\_ TIME SIGNED: \_\_\_\_\_

I, **(PARENT AND/OR GUARDIAN)** \_\_\_\_\_

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WEST VALLEY SCHOOL.

DATE: \_\_\_\_\_ TIME SIGNED: \_\_\_\_\_

I, **(PARENT AND/OR GUARDIAN)** \_\_\_\_\_

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DATE: \_\_\_\_\_ TIME SIGNED: \_\_\_\_\_

I, **(PARENT AND/OR GUARDIAN)** \_\_\_\_\_

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DATE: \_\_\_\_\_ TIME SIGNED: \_\_\_\_\_

I, **(PARENT AND/OR GUARDIAN)** \_\_\_\_\_

HEREBY ASSUME ALL OF THE RISKS AND RESPONSIBILITY OF THE RELEASED  
**STUDENT/ATHLETE** \_\_\_\_\_ FROM THE RESPONSIBILITY AND CARE OF  
WEST VALLEY SCHOOL.

DATE: \_\_\_\_\_ TIME SIGNED: \_\_\_\_\_

**WEST VALLEY SCHOOL STUDENT  
ACTIVITIES/ATHLETIC HANDBOOK SIGN-OFF  
2023/2024 School Year**

My signature on this document verifies my consent and understanding on the following documents:

1. I have received a copy of the **West Valley School Student Activities/Athletic Handbook** for the 2023-2024 school year. I have read and understand the policies and procedures as outlined in the handbook and agree to follow and abide by said policies and procedures.

Name of Student(s) \_\_\_\_\_

\_\_\_\_\_  
Parent Signature(s) Date

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

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

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

**PLEASE RETURN THIS SIGN-OFF SHEET TO THE OFFICE BY \_\_\_\_\_**