	Navasota		UIL AI	<b>2010-11</b> ND PARENT CERTIF	ICATION	FOR	
	Independent School			RTICIPATION IN AT			
FILE W/ THE A'	IESE FORMS MUST BE COM THLETIC TRAINER AT YOU CAL HISTORY OR MEDICA	JR SCHOOL BEFO	RE PARTICIPATIO	N IN ANY ATHLETIC AC	CTIVITY. A	DITIONAL	LLY, A
CURRENT MEDICAL HISTORY OR MEDICAL HISTORY/PHYSICAL MUST ALSO BE ON FILE IN THE ATHLETIC TRAINERS OFFICE. PLEASE PRINT CLEARLY <u>NO PENCIL</u> , USE BLUE OR BLACK INK,							
	<u>-11</u> : 7 8 9 10						
ľ	s you might play – Football	-					
Athlete	ME	FIRST	SS #		Age	Sex: M	F
Addres	s - Street, City, Zip code CONTACT ( CALL FIRST): 1						
ALTERNATE EMERGENCY CONTACT : NAME Phone Number         Medical Conditions (i.e. diabetes, asthma)							
Required Medications Allergies to Medications or other							
**Health insurance information to assist with doctor referrals and claims. STRICTLY CONFIDENTIAL							
	E CARD IS AVAILABLE						
	Name						
Date of Birth Insurance Company Phone Number							
Insurance Address							
Coach or other It is unders remains. Neither I have read abide by all of t The unders the judgment of I do hereby req hospital, or dist by any person v I have bee responsibilitie on UIL forms of Your signa	ve my consent for the above s representative of the school of tood that even though protect of the University Interscholastic and understand the Universi he University Interscholastic L signed agrees to be responsite any representatives of Navas uest, authorize, and consent t rict representative; and I do he whomsoever on account of su <b>n provided the UIL Parent I</b> <b>s as a parent/guardian. I un- could subject the student in</b> ture below gives authorization ce personnel to share informa- ize the Navasota ISD Staff Att al.	tudent to compete in any trips. ive equipment is we c League nor Nava ty Interscholastic Le eague rules. le for the safe retur sota ISD, the above o such care and tre ereby agree to inde ch care and treatment formation Manual derstand that failu question to penal that is necessary f	orn by the athlete whe sota ISD assumes an eague rules on the rev n of all athletic equipn student needs immed atment as may be giv mnify and save harm ent of said student. I regarding health an ire to provide accura ties determined by the or the school district, edical diagnosis and tr	plastic League approved s never needed, the possib y responsibility in case an erse side of this form and diate care and treatment a en to said student by any ess the district and any di <b>nd safety issues and my</b> <b>te and truthful informati</b> <b>he UIL.</b> its athletic trainers, coach eatment for your student.	ility of an ac accident oc agree that to the abov as a result of physician, a strict repres ion es, associat	ccident still ccurs. my son/daug re named stur f any injury o athletic traine centative from ted physician	ghter will dent. If, in or sickness, er, nurse, n any claim as and
Signature of	parent/guardian			Dat	e		
Parent form.	and Student's	signatur	e are requ	ired on the l	back ( Rev 12-		

## GENERAL INFORMATION

School coaches may not:

 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: school coaches may hold one 6-day camp in their school district for incoming 7th, 8th and 9<sup>th</sup> grade students),

• 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.

• Schools and school booster clubs may not provide funds, fees, or transportation for non-school activities.

### **GENERAL ELIGIBILITY RULES**

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

• are not 19 years of age or older on or before September 1 of the current scholastic year. (See 504 handicapped exception.)

• have not graduated from high school.

• 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.

• are full-time day students in a participant high school.

• initially enrolled in the ninth grade not more than four calendar years ago.

• are meeting academic standards required by state law.

• 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*).

• have observed all provisions of the Awards Rule.

have not represented a college in a contest.

• have not been recruited. (Does not apply to college recruiting as permitted by rule.)

• 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.

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 allow 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.
did not change schools for athletic purposes.

#### FOOTBALL HELMET WARNING

No helmet can prevent all head, neck or back injuries a player may receive while participating in football. Do not use the helmet to butt, ram, or spear an opposing player. This is in violation of the football rules and such use can result in severe head or neck injuries including paralysis or death to you and possible injury to your opponent.

#### CONSENT FOR RELEASE OF MEDICAL INFORMATION

I authorize the Navasota Independent School District, and/or staff members to receive or relay medical information regarding my child to medical personnel, school administrators, physical education personnel, athletic trainer, coaches, and teachers as deemed necessary. • I have been provided the UIL Parent Information Manual regarding health and safety issues 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.

# ACKNOWLEDGEMENT OF RULES

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

Date

Signature of Student

Date

Signature of Parent/Guardian

Rev 12-1-09