

**MIDDLE SCHOOL EXTRA-CURRICULAR ACTIVITIES ELIGIBILITY INFORMATION**  
**2011-2012**

We are excited that you are participating in our middle school activities program. We hope that you have a positive and rewarding experience. Participation in extra-curricular activities at the middle level is a privilege, not a right. Students participating in extra-curricular activities are held to high standards and will demonstrate respectful and responsible behavior at all times. Participants will be subjected to the conditions outlined below. Violations by middle school students in activities will be addressed at the building level where a student improvement plan will be devised under the direction of the building principal and appropriate school personnel.

**General Rules:**

- 1. Attendance**—Students must be in attendance a minimum of three (3) hours per day in order to practice and/or participate in an extra-curricular activity. If special circumstances arise, contact the activities coordinator and/or building principal.
- 2. Eligibility**—A student who is under penalty of exclusion, expulsion or suspension whose character or conduct violates the Student Code of Responsibilities (as defined below), is not in good standing and is ineligible for a period of time as determined by the principal.

***Student Code of Responsibilities***

*As a student participating in my school's interscholastic activities, I understand and accept the following responsibilities:*

- 1. I will respect the rights and beliefs of others and will treat others with courtesy and consideration.*
- 2. I will be fully responsible for my own actions and the consequences of my actions.*
- 3. I will respect the property of others.*
- 4. I will respect and obey the rules of my school and the laws of my community, state, and country.*
- 5. I will show respect to those who are responsible for enforcing the rules of my school and the laws of my community, state, and country.*

**3. Mood Altering Chemicals**—During the calendar year, regardless of the quantity, a student shall not use, buy, sell, possess or give away tobacco, any beverage containing alcohol and/or any other controlled substance.

**4. Racial/Religious/Sexual Harassment/Violence and Hazing**—During the school year, a student shall not be involved in hazing (an act against a student, or coercing a student into committing an act, that creates a risk of harm to a person, in order for the student to be initiated into or affiliated with a student organization, or for any other purpose) or violate the racial/religious/sexual harassment and racial/religious/sexual violence bylaws of the Minnetonka School District.

**Consequences May Include the Following:**

- 1. First Violation:** After confirmation of the first violation, the student will not be able to participate in any extra-curricular activities for two (2) consecutive weeks, or two (2) contests/competitions/performances, whichever is greater.
- 2. Second Violation:** After confirmation of the second violation, the student will not be able to participate in any extra-curricular activities for six (6) consecutive contests/competitions/performances, or three (3) weeks, whichever is greater.
- 3. Third and Subsequent Violations:** After confirmation of the third or subsequent violations, the student will not be able to participate in any extra-curricular activities for twelve (12) consecutive contests/competitions/performances or four (4) weeks, whichever is greater.
- 4. Accumulative Penalties:** Penalties shall be accumulative beginning with the student's first participation in an activity and continuing through the student's middle school career.
- 5. Denial Disqualification:** A student shall be disqualified from all athletic, enrichment activities for nine (9) additional weeks beyond the student's original period of ineligibility when the student denies violation of the rule, is allowed to participate and then is subsequently found guilty of the violation.

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I have read, understand, and acknowledge receiving the 2011-2012 Middle School Extra-curricular Activities Eligibility Information which contains a summary of the eligibility rules for Minnetonka Middle Schools. I understand that a copy of the Official Handbook of the Minnetonka School District and Minnesota State High School League (MSHSL) is on file with the high school Activities Director and/or principal and that I may review it, in its entirety, if I so choose. The MSHSL Official Handbook and bylaws are also posted on the MSHSL Web site: [www.mshsl.org](http://www.mshsl.org) in the publication section for my review. I further understand that a member school of the MSHSL must adhere to all of the rules and regulations that pertain to the League activities a school may sponsor, but that local rules may be more stringent than MSHSL rules.

**\*Informed Consent:** By its nature, participation in interscholastic athletics includes risk of injury and the transmission of infectious diseases such as HIV, Herpes and Hepatitis B and others. Although serious injuries are not common and the risk of HIV transmission is almost nonexistent in supervised school athletic programs, it is impossible to eliminate all risk. Participants have the responsibility to help reduce that risk. Participants must obey all safety rules, report all physical and hygiene problems to their coaches, follow a proper conditioning program, and inspect their own equipment daily. **PARENTS, GUARDIANS OR STUDENTS WHO MAY NOT WISH TO ACCEPT THE RISK DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS FORM. STUDENTS MAY NOT PARTICIPATE IN A MINNETONKA-SPONSORED ACTIVITY WITHOUT THE STUDENT'S AND PARENT'S/GUARDIAN'S SIGNATURE.**

\*I consent to school personnel treating injuries and authorize them to discuss those injuries with and release any applicable medical information or records relating to those injuries to coaches, school staff and other qualified health care providers as deemed necessary within their scope of practice. I further understand that in the case of injury or illness requiring transportation to a health care facility, a reasonable attempt will be made to contact the parent or guardian in the case of the student-athlete being a minor, but if necessary, the student-athlete will be transported via ambulance to the nearest hospital.

**\*Students:** Your participation in school activities is dependent on your eligibility. PROTECT that eligibility by reviewing with your parent(s)/guardian(s) this summary of Minnesota State High School League rules which govern your participation. Complete regulations are found in the MSHSL Official Handbook which is available at each member high school and which is also posted on the MSHSL Web site: [www.mshsl.org](http://www.mshsl.org). Please keep this sheet for reference, and if there is a question about any rule interpretation, CONTACT YOUR SCHOOL PRINCIPAL OR ATHLETIC/ACTIVITIES DIRECTOR.

**\*Parents/Guardians:** REVIEW the following rules with your son or daughter. Your role in stressing the value of following these rules cannot be overstated.

**\*Checklist for Student Eligibility** (If you cannot check all items, see your activities director)

- \_\_\_ 1. Student has had a physical exam within the last three (3) years and it is on file with the school.  
A current physical is required for participation in competitive sports. If student is involved in other extra-curricular activities (i.e. student govt., musical, yearbook, etc.), you may skip this question.
- \_\_\_ 2. Student has not accepted cash in any amount or merchandise valued at more than \$100 for participating in a sport.  
If student is involved in other extra-curricular activities (i.e. student govt., musical, yearbook, etc.), you may skip this question.
- \_\_\_ 3. Student has not and will not use or possess tobacco or alcoholic beverages or use, consume, have in possession, buy, sell or give away any other controlled substance, including steroids.
- \_\_\_ 4. Student has not and will not violate the racial/religious/sexual harassment/violence/and hazing bylaws of the MSHSL.

**The student and parent/guardian authorize the release of documents and other pertinent information by the school in order to determine student eligibility. In addition, the student and parent/guardian understand and agree that public information may include names and pictures of students participating in or attending extra-curricular activities.**

By signing this we acknowledge that we have read the above information contained in the MIDDLE SCHOOL EXTRA-CURRICULAR ACTIVITIES ELIGIBILITY INFORMATION

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<b>Student's Name</b>	<b>Student's Signature</b>	<b>Birth Date</b>	<b>Grade in School</b>	<b>Date</b>
<b>Parent/Guardian Signature</b>				<b>Date</b>

**PARENT'S PERMIT AND HEALTH QUESTIONNAIRE**

*This form must be completed, signed and returned to the school each year before the student will be permitted to practice or play.*

Please complete this entire section even if you are not currently participating in a competitive sport. This form only needs to be completed annually and a student may choose to participate in a competitive sport during the winter and/or spring season.

Name of Student \_\_\_\_\_

Birth Date \_\_\_\_\_

School \_\_\_\_\_

Gender: M or F

Grade: 6 - 7 - 8

Minnesota State High School League regulations provide that any student who intends to participate in middle school extra-curricular activities must have on file in this school a record of a satisfactory physical examination performed by a doctor within the previous three years. More frequent examinations may be required.

The following questions **must** be answered by the parent or guardian:

**PLEASE CIRCLE**

- |  |     |    |
|--|-----|----|
| 1. The student named above has a physical record on file in the school?  | Yes | No |
| 2. Has the student been hospitalized since the above physical examination?   | Yes | No |
| 3. Has the student had a major injury since the above physical examination?  | Yes | No |
| 4. Has the student been found to have only one organ of usually paired organs?<br>(example: only one kidney, or one good eye)                                      | Yes | No |
| 5. Has the student required medication on a daily or episodic routine?<br>(example: insulin daily or asthma medication with an attack)                             | Yes | No |
| 6. Has the student been knocked unconscious, had a concussion, or had a head injury at any time within the past 12 months?   | Yes | No |
| 7. Has the student fainted, blacked out, experienced dizziness or chest pain while exercising in the past year?  | Yes | No |
| 8. Are there any weight loss or nutritional issues to consider, including self-induced vomiting, over-exercising, laxative use, or diuretic use to control weight? | Yes | No |
| 9. Do you know of or believe there is any health reason why this student should not participate in co-curricular activities?<br>If so, why? _____                  | Yes | No |
| _____  |     |    |
| _____  |     |    |
| _____  |     |    |

The undersigned, herewith,

1. Grants the above named student permission to participate in middle school extra-curricular activities.
2. Grants permission to take the student on supervised trips connected with middle school extra-curricular activities.
3. Understands that the student must refrain from practice or play during medical treatment until he/she is given a written permit by the attending physician to resume participation.
4. Certifies that the answers to the questions above are correct and true.
5. Certifies that the above named student is physically fit to participate in all middle school extra-curricular activities.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian

**TRANSPORTATION FORM**

Minnetonka School Board Policy 1201 Form B

**BLANKET PARENT PERMISSION FORM FOR MIDDLE LEVEL ACTIVITY BUSTRIP**

Student's Name: \_\_\_\_\_  
Last (Print)                      First (Print)                      Initial (Print)

We understand that the nature of our child's activity or activities this year may involve him/her in a number of events away from the school premises. We understand that adequate and appropriate supervision will be provided. We recognize, however, that unanticipated situations can arise on any trip that are not reasonably within the control of the supervising coach/advisor(s). We hereby grant permission for our son/daughter to participate in all such school sponsored trips during the current 2011-2012 school year.

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

**MINNETONKA MIDDLE SCHOOL EAST  
STUDENT ACTIVITIES OFFICE (952) 401-5224  
Transportation Agreement**

**Parent Drive – Own Student and/or Another Student**

**According to Minnetonka Public Schools Policy, all students attending events and/or practices as a member of a school team or group are required to ride the District-provided transportation when such transportation is provided.** When approved by the coach/advisor and as a convenience to our participants and their parents/guardians, students may be driven by their parent/guardian or another adult(s), to and/or from a school sponsored event in a privately-owned vehicle. This form must be completed in full one time per year.

**We realize some students will ride a bus only, but as a precaution we require that all students/parents complete this form.**

Today's Date \_\_\_\_\_ Student Name \_\_\_\_\_,

Grade \_\_\_\_\_, Minnetonka Middle School East Activities \_\_\_\_\_

requests permission to **(choose one or more where applicable)**

**Ride with Parent** (sign disclosure at the bottom of this form)

**Ride with another Adult(s)** Other Adult's Name(s) \_\_\_\_\_ (parent and other adult(s) sign disclosure(s) at the bottom of this form)

Coach / Advisor / Director's Name(s) \_\_\_\_\_

I understand that when I agree to transport my own child, myself or another student in conjunction with any activity I assume a personal and legal responsibility for the safety of everyone in my vehicle. I accept this responsibility and realize that it may cause me to be held liable in the event of an accident or injury to the student(s) involved.

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

Signature of other adult(s) driving student \_\_\_\_\_ Date \_\_\_\_\_

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_