

WISCONSIN INTERSCHOLASTIC ATHLETIC ASSOCIATION PHYSICAL EXAMINATION CARD
APPROVAL FOR TWO YEARS OF COMPETITION - EXAMINATION NEEDS TO BE TAKEN AFTER APRIL 1st
ATHLETES CANNOT PARTICIPATE IN PHYSICAL ACTIVITY IN ANY WAY UNTIL THIS CARD IS
TURNED IN TO THE ACTIVITIES OFFICE

Name _____ Date of Birth _____ Grade _____ Age _____ Gender _____
Last Middle Initial First

The above named student has been examined and there are no apparent contraindications to participating in interscholastic athletic activities except as follows:

Sports or school activities in which this student cannot participate are as follows: (if none-write NONE)

If student is restricted or disqualified, please indicate reasons: _____

If approved for only one year of competition, please check here: _____ Doctor's Signature _____

Doctor's Address _____ Date of Examination _____

City & State _____ Telephone _____

Athletes Address of Primary Residency _____ Home Telephone _____

City/Town/Village _____ Zip Code _____ Parent Cell Phone _____

PARENT PERMISSION AND ACKNOWLEDGEMENTS:

1. I, as a parent or legal guardian of the above athlete, have read, understand, and therefore agree to support the policies and rules set forth for athletes at Kettle Moraine High School and give my son/daughter permission to participate under those conditions.
2. I also give permission for school personnel, in an emergency situation at a school athletic event; to make decisions on certified medical assistance, first aid and care to my child should he/she require such assistance or emergency first aid by the coach.
3. As the parent (or legal guardian) of the above named athlete, I agree to be financially responsible for the safe return of all athletic equipment issued to him/her. I further agree to hold my son/daughter financially accountable for any and all equipment, which he/she might lose, misplace, or damage.
4. I realize that there is an inherent risk of injury through participating in all sports. I realize this risk may be severe, including the risk of fractures, brain injuries, paralysis or even death. I have sufficient insurance and am willing to take full financial responsibility for any and all injuries sustained by my child while participating in the interscholastic athletic program under the direction of Kettle Moraine High School.

Signature of Parent/Legal Guardian _____ Date _____

ATHLETES CANNOT PARTICIPATE IN PHYSICAL ACTIVITY IN ANY WAY UNTIL THIS CARD IS TURNED IN TO THE
ATHLETIC OFFICE

ATHLETIC CODE OF CONDUCT: Every member high school of the Wisconsin Interscholastic Athletic Association (WIAA) is required to have a code of conduct for all student participants. Kettle Moraine students have established five core values that are basic to good citizenship and good sportsmanship. These student identified core values are: 1) Mutual Respect, 2) Honesty, 3) Good Communication, 4) Open-mindedness to Diversity, and 5) Maintaining a strong work ethic. Since athletes represent the school, their behavior and appearance frequently determine the opinion others have of the school and the individuals within the school. Training rules and abiding by the athletic code of conduct are a matter of self discipline. The best performance an individual is capable of producing comes only after the body and the mind have been conditioned through a regular training routine.

CONDUCT UNBECOMING AN ATHLETE: All student athletes shall observe the following training rules both in-season and out-of-season for the athlete's entire school career, including vacation periods. Possession or use of a controlled substance, tobacco, alcoholic beverages, illegal drugs, performance enhancing substances, fighting, theft, possession of stolen property, negative acts against persons or property, conduct resulting in suspension from school are examples of conduct unbecoming an athlete. Conduct unbecoming an athlete could result in suspension from competition as per standards outlined in the formal code of conduct. (The complete code of conduct can be found in the parent/athlete handbook/athletic website.)

Any coach, teacher, administrator, law enforcement officer, or adult member of the community who becomes aware of a possible violation of the code of conduct will report the violation to the Athletic Director in a signed written communication. Upon receiving a validated report, the Athletic Director shall investigate the charge. It is our expectation that any athlete who violates the code of conduct will knowingly and willingly refer their violation to the Athletic Director.

WE, AS PARENT AND ATHLETE, HAVE READ, UNDERSTAND, AND THEREFORE AGREE TO ABIDE BY ALL RULES AND REGULATIONS SET FORTH IN THE KETTLE MORAIN HIGH SCHOOL CODE OF CONDUCT FOR PARTICIPATION IN INTERSHCOLASTIC ATHLETICS.

Parent/Guardian Signature _____ Date _____

Athlete Signature _____ Date _____

WIAA RULES OF ELIGIBILITY: The WIAA requires all schools to distribute the WIAA Rules and Regulations pertaining to student eligibility in interscholastic athletics to each parent/legal guardian. Please sign below that you have received your copy of the WIAA Rules and Regulations of Eligibility.

Parent/Legal Guardian Signature _____ Date _____