



WAYNE COUNTY SCHOOL SYSTEM
Athletic Director – Coach Ken Cribb

ATHLETIC DEPARTMENT CONSENT FORM

Student's Name _____

Birthday: _____ Age: _____ Grade: _____

Student's Cell Phone: _____ Home Phone: _____

Parent/Guardian's Name: _____

Parent's Cell Phone: _____ Work/Other Phone: _____

Home Address: _____

Insurance Information:

Name on Policy: _____

Name of Company: _____

Policy Number: _____

Dates of Coverage if Applicable: _____

Allergies/Health Concerns: _____

Authorization and Consent:

I, the Parent/Guardian of the student indicated above, do by my signature contained herein grant full permission for him/her to participate in competitive sports for the Wayne County Public School System.

I understand that it is my responsibility to provide insurance for my child by a personal policy or by a special policy, if offered by the Wayne County Athletic Department for athletic injuries. I certify that I am financially responsible for all charges incurred by my child for the treatment of any injury received while participating in the athletic program of the Wayne County Public School System.

I authorize the approved medical personnel designated by the officials of the Wayne County Athletic Department to administer any emergency treatment as is deemed necessary for injuries or illness that my child may incur while participating in an approved event of the Wayne County Public School System. I certify that no guarantee or assurance has been made as to the results that may be obtained from the treatment.

I give my permission for the medical team authorized by the Wayne County Athletic Department to perform the necessary pre-participation physical evaluation and examination on my child. *Georgia's medical consent law as passed by the Georgia General Assembly requires the parent or guardian's consent for medical or surgical treatment of a minor.

Warning: I give my permission for the student indicated above to participate in organized high school athletics, realizing that such activity involves the potential for injury, which is inherent in all sports. I acknowledge that, even with the best equipment and strict observance of rules, injuries are still a possibility. On rare occasions these injuries can be so severe as to the result in total disability, paralysis, or even death. I will not hold the Wayne County Public School System, the coaching staff, the team medicals evaluation group, or the athletic department responsible should injury occur.

Parent Signature: _____ Date: _____

One Jacket Drive – Jesup, Georgia 31545

Telephone (912) 427-1096 Ext.813 Fax (912)427-1081

Georgia High School Association Student/Parent Concussion Awareness Form

SCHOOL: Wayne County High School

DANGERS OF CONCUSSION

Concussions at all levels of sports have received a great deal of attention and a state law has been passed to address this issue. Adolescent athletes are particularly vulnerable to the effects of concussion. Once considered little more than a minor “ding” to the head, it is now understood that a concussion has the potential to result in death, or changes in brain function (either short-term or long-term). A concussion is a brain injury that results in a temporary disruption of normal brain function. A concussion occurs when the brain is violently rocked back and forth or twisted inside the skull as a result of a blow to the head or body. Continued participation in any sport following a concussion can lead to worsening concussion symptoms, as well as increased risk for further injury to the brain, and even death.

Player and parental education in this area is crucial – that is the reason for this document. Refer to it regularly. This form must be signed by a parent or guardian of each student who wishes to participate in GHSA athletics. One copy needs to be returned to the school, and one retained at home.

COMMON SIGNS AND SYMPTOMS OF CONCUSSION

- Headache, dizziness, poor balance, moves clumsily, reduced energy level/tiredness
- Nausea or vomiting
- Blurred vision, sensitivity to light and sounds
- Fogginess of memory, difficulty concentrating, slowed thought processes, confused about surroundings or game assignments
- Unexplained changes in behavior and personality
- Loss of consciousness (NOTE: This does not occur in all concussion episodes.)

BY-LAW 2.68: GHSA CONCUSSION POLICY: In accordance with Georgia law and national playing rules published by the National Federation of State High School Associations, any athlete who exhibits signs, symptoms, or behaviors consistent with a concussion shall be immediately removed from the practice or contest and shall not return to play until an appropriate health care professional has determined that no concussion has occurred. (NOTE: An appropriate health care professional may include licensed physician (MD/DO) or another licensed individual under the supervision of a licensed physician, such as a nurse practitioner, physician assistant, or certified athletic trainer who has received training in concussion evaluation and management.)

a) No athlete is allowed to return to a game or a practice on the same day that a concussion (a) has been diagnosed, OR (b) cannot be ruled out.

b) Any athlete diagnosed with a concussion shall be cleared medically by an appropriate health care professional prior to resuming participation in any future practice or contest. The formulation of a gradual return to play protocol shall be a part of the medical clearance.

By signing this concussion form, I give Wayne County High School permission to transfer this concussion form to the other sports that my child may play. I am aware of the dangers of concussion and this signed concussion form will represent myself and my child during the 2020-2021 school year. This form will be stored with the athletic physical form and other accompanying forms required by the Wayne County School System.

I HAVE READ THIS FORM AND I UNDERSTAND THE FACTS PRESENTED IN IT.

Student Name (Printed)

Student Name (Signed)

Date

Parent Name (Printed)

Parent Name (Signed)

Date

Georgia High School Association

Student/Parent Sudden Cardiac Arrest Awareness Form

SCHOOL: Wayne County High School

1: Learn the Early Warning Signs

If you or your child has had one or more of these signs, see your primary care physician:

- Fainting suddenly and without warning, especially during exercise or in response to loud sounds like doorbells, alarm clocks or ringing phones
- Unusual chest pain or shortness of breath during exercise
- Family members who had sudden, unexplained and unexpected death before age 50
- Family members who have been diagnosed with a condition that can cause sudden cardiac death, such as hypertrophic cardiomyopathy (HCM) or Long QT syndrome
- A seizure suddenly and without warning, especially during exercise or in response to loud sounds like doorbells, alarm clocks or ringing phones

2: Learn to Recognize Sudden Cardiac Arrest

If you see someone collapse, assume he has experienced sudden cardiac arrest and respond quickly. This victim will be unresponsive, gasping or not breathing normally, and may have some jerking (Seizure like activity). Send for help and start CP. You cannot hurt him.

3: Learn Hands-Only CPR

Effective CPR saves lives by circulating blood to the brain and other vital organs until rescue teams arrive. It is one of the most important life skills you can learn – and it's easier than ever.

- Call 911 (or ask bystanders to call 911 and get an AED)
- Push hard and fast in the center of the chest. Kneel at the victim's side, place your hands on the lower half of the breastbone, one on top of the other, elbows straight and locked. Push down 2 inches, then up 2 inches, at a rate of 100 times/minute, to the beat of the song "Stayin' Alive."
- If an Automated External Defibrillator (AED) is available, open it and follow the voice prompts. It will lead you step-by-step through the process, and will never shock a victim that does not need a shock.

By signing this sudden cardiac arrest form, I give Wayne County High School permission to transfer this sudden cardiac arrest form to the other sports that my child may play. I am aware of the dangers of sudden cardiac arrest and this signed sudden cardiac arrest form will represent myself and my child during the 2020-2021 school year. This form will be stored with the athletic physical form and other accompanying forms required by the Wayne County School System.

I HAVE READ THIS FORM AND I UNDERSTAND THE FACTS PRESENTED IN IT.

Student Name (Printed)

Student Name (Signed)

Date

Parent Name (Printed)

Parent Name (Signed)

Date

**GEORGIA HIGH SCHOOL ASSOCIATION
HEAT AND HUMIDITY
POLICY ACKNOWLEDGEMENT**

2.67 Practice Policy for Heat and Humidity:

- (a) Schools must follow the statewide policy for conducting practices and voluntary conditioning workouts (this policy is year-round, including during the summer) in all sports during times of extremely high heat and/or humidity that will be signed by each head coach at the beginning of each season and distributed to all players and their parents or guardians. The policy shall follow modified guidelines of the American College of Sports Medicine in regard to:
 - (1) The scheduling of practices at various heat/humidity levels.
 - (2) The ratio of workout time to time allotted for rest and hydration at various heat/humidity levels.
 - (3) The heat/humidity levels that will result in practice being terminated.
- (b) A scientifically-approved instrument that measures the Wet Bulb Globe Temperature must be utilized at each practice to ensure that the written policy is being followed properly. WBGT readings should be taken every hour, beginning 30 minutes before the beginning of practice.

WBGT ACTIVITY GUIDELINES AND REST BREAK GUIDELINES

- Under 82.0 Normal Activities - Provide at least three separate rest breaks each hour with a minimum duration of 3 minutes each during the workout.
- 82.0 - 86.9 Use discretion for intense or prolonged exercise; watch at-risk players carefully. Provide at least three separate rest breaks each hour with a minimum duration of 4 minutes each.
- 87.0 - 89.9 Maximum practice time is 2 hours. For Football: players are restricted to helmet, shoulder pads, and shorts during practice, and all protective equipment must be removed during conditioning activities. If the WBGT rises to this level **during** practice, players may continue to work out wearing football pants without changing to shorts. For All Sports: Provide at least four separate rest breaks each hour with a minimum duration of 4 minutes each.
- 90.0 - 92.0 Maximum practice time is 1 hour. For Football: no protective equipment may be worn during practice, and there may be no conditioning activities. For All Sports: There must be 20 minutes of rest breaks distributed throughout the hour of practice.
- Over 92.0 No outdoor workouts. Delay practice until a cooler WBGT level is reached.

-
- (c) Practices are defined as: the period of time that a participant engages in a coach-supervised, school-approved sport or conditioning-related activity. Practices are timed from the time the players report to the practice or workout area until players leave that area. If a practice is interrupted for a weather-related reason, the "clock" on that practice will stop and will begin again when the practice resumes.
 - (d) Conditioning activities include such things as weight training, wind-sprints, timed runs for distance, etc., and may be a part of the practice time or included in "voluntary workouts."
 - (e) A walk-through is not a part of the practice time regulation, and may last no longer than one hour. This activity may not include conditioning activities or contact drills. No protective equipment may be worn during a walk-through, and no full-speed drills may be held.
 - (f) Rest breaks may not be combined with any other type of activity and players must be given unlimited access to hydration. These breaks must be held in a "cool zone" where players are out of direct sunlight.
 - (g) When the WBGT reading is over 86, ice towels and spray bottles filled with ice water should be available at the "cool zone" to aid the cooling process AND cold immersion tubs must be available for the benefit of any player showing early signs of heat illness. *In the event of a serious EHI, the principal of "Cool First, Transport Second" should be utilized and implemented by the first medical provider onsite until cooling is completed (core temperature of 103 or less).*

Coach Name

Coach Signature

Date

This is Confirmation that I have read the above policy:

Student Signature

Parent Signature

Date

GHSA HEAT POLICY – FREQUENTLY ASKED QUESTIONS

WHEN DOES THE HEAT POLICY STOP?

Some aspects of the heat policy are always in effect regardless of the sport. The limitations in By-law 2.67 (Practice Policy for Heat and Humidity) are in effect anytime the Wet Bulb Globe Temperature (WBGT) reading registers in an elevated level. The limitation on activities that are on the published chart must be followed.

WHAT IS THE WBGT?

The Wet Bulb Globe Temperature reading is a composite temperature used to estimate the effect of air temperature, humidity, and solar radiation on the human body. The reading is expressed in degrees, but should not be equated with degrees of air temperature. For example: A WBGT reading of 92 is somewhat comparable to a Heat Index reading of 104-105 degrees.

A Heat index reading merely reflects the combination of heat and humidity as “how hot it feels” on a person who is normally dressed and not involved in strenuous activity. Therefore, the Heat Index has little relevance to a football practice setting.

HOW FREQUENTLY SHOULD WBGT READINGS BE TAKEN IN PRACTICE?

The reading should be taken every hour, beginning 30 minutes before the scheduled beginning of practice to determine what levels of activity are permissible – or if the practice will need to be postponed until the WBGT reading gets to an acceptable level. An early practice with temperatures increasing during the practice time may require several readings being taken. A late afternoon or evening practice with temperatures decreasing during the practice time should not require additional readings. The important thing is that the risks to the players are being monitored appropriately.

WHY DOES THE HEAT POLICY APPLY TO PRACTICES AND NOT TO GAMES?

The researchers who conducted the 3-year study on heat illness agreed with the GHSA administrators that there are enough built-in opportunities for players to get rest and hydration breaks during the course of a game. Everyone on the team is not participating intensely at one time. Officials and coaches are available to monitor 22 players in a game setting, while coaches may have 100 or more players to monitor during a practice setting.

It is important to remember that scrimmages are practices and they do fall under the heat policy guidelines. These interscholastic contests often occur early in the acclimatization process and extra attention needs to be given to player well-being.

WHAT CONSTITUTES A “CONDITIONING ACTIVITY”?

Conditioning activities involve weight-training, wind sprints, timed runs for distance and other such things. Whether these activities are done before or after a practice, they are considered to be a part of the practice and must be figured into the time restrictions. The heat policy should be in effect for “voluntary conditioning” programs since statistics at both high school and collegiate levels indicate that a large percentage of serious heat illness episodes occur during these activities.

WHAT ARE “WALK-THROUGHS”, WHEN MAY THEY BE HELD?

Walk-throughs are not considered a part of a practice since they have so many limitations placed on them. A walk-through session may last no longer than one hour. During a walk-through period, players may not wear protective equipment so no contact drills may be held. No conditioning activities may be held during a walk-through period. A walk-through may not be held on a day when there are two practices being held. These sessions are designed to work on offensive and defensive schemes and techniques without being involved in contact work.