

BRITANNIA ATHLETIC DEPARTMENT

INFORMATION SHEET



Dear Parent / Guardian:

We are pleased that your son/daughter has chosen to participate as a member of the _____ team. As they are representing Britannia Secondary School we expect certain stands to be maintained.

ATTENDANCE AND COMMITMENT: Since teachers/coaches give voluntary time, each team member is expected to attend all practices and games. If an athlete knows that there may be a conflict between school athletics and outside activities, they must discuss this with the coach prior to the game or practice in question.

INELIGIBILITY: An athlete may be deemed to be ineligible to play, for any school team during the year, if they have been expelled from a team for any reason or if they have quit the team after the final player decisions have been made.

CONDUCT: Team members are expected to maintain a high standard of behaviour and sportsmanship at all times. Coaches, teammates, opponents, and officials are to be treated with respect. The use of alcohol, drugs or tobacco products traveling to, during or returning from games, tournaments or practices are prohibited. Any violations may result in expulsion from the team.

CLASS ATTENDANCE: Athletes are expected to attend all classes, except for those which they have been excused from in order to participate in school sanctioned team activities. All athletes are responsible for any missed class work. Team members are also expected to participate in Physical Education classes on game day.

ACADEMIC ELIGIBILITY: All athletes are required to maintain academic standards to the best of their ability.

FEES: Athletes will be required to pay a fee to help offset the cost of uniforms, referees, medical equipment, supplies, registration and tournament fees and in some situations, transportation. The athletic fee for this is \$30.00.

UNIFORMS: Failure to return the team uniform, promptly and in good condition, at the end of the season will result in the athlete being charged for the replace cost.

SERVICE: At times during the season, team members will be required to assist the Athletic Department in some form of service. Service activities include refereeing, scoring, timing, etc.

HEALTH INFORMATION: The information on the back of this form must be completed and returned to the coach prior to the commencement of the season.

BRITANNIA ATHLETIC DEPARTMENT
PARENTAL CONSENT AND STUDENT COMMITMENT FORM



Your child has indicated an interest in participating in Britannia's Athletic Program. This school believes that parents or guardians should express their wishes regarding student participation in high school competition.

The commitment and consent form below must be signed, as indicated, by a participating athlete and their parent or guardian. The signed form must be returned to the coach/sponsor teacher prior to the commencement of each league.

STUDENT INFORMATION

Name of Student: _____

Student Number: _____ Home Room: _____

Address: _____

Telephone: _____ Sport: _____ Division: _____

I, the undersigned, have joined Britannia's _____
(Team and Division)

team knowing that I have committed myself to the following conditions:

I am obligated to remain with the team throughout the entire season. I have read and understand the Britannia Athletic Department Information Sheet and shall adhere to all rules and regulations. I must attend all practices and games unless I have the coach's permission to be absent.

Signature (Student)

PARENT / GUARDIAN INFORMATION

I believe my son/daughter, named above, to be physically fit to take part in the above-mentioned activity and endorse his/her commitment to the program throughout this season.

Signature (Parent/Guardian)

DATE: _____

Student-Athlete and Participant Agreement



All participants of Britannia Secondary athletic programs agree to abide by the following requirements when entering facilities and/or participating in school sport activities under the COVID-19 Response Plan and Return to Sport Protocol:

1. I agree to and I am responsible for completing a health screening self-check prior to every team activity and will inform my coach immediately if I have experienced any COVID-19 symptoms in the last 14 days.
2. I agree to stay home if feeling sick or if experiencing COVID-19 symptoms.
3. I agree to wear a mask in high traffic areas such as buses and in common areas such as hallways, or anytime outside of my learning group whenever physical distancing cannot be maintained.
4. I agree to sanitize my hands upon entering and exiting the facility, with soap or sanitizer.
5. I agree to sanitize the equipment I use throughout the practice as directed by my coach.
6. I agree to practice correct Respiratory Etiquette at all times.
7. I agree to continue to follow social distancing protocols of staying at least 2m away from others outside of my cohort.
8. I agree to minimize physical contact with others in my cohort and follow my coaches sport specific directions in this regard.
9. I agree to follow all equipment and facilities procedures communicated by my coach.
10. I agree to not share water bottles and personal equipment with others.
11. I agree to abide by all COVID-19 procedures and guidelines indicated for my participation in classes or on my team.
12. I understand that if I do not abide by the aforementioned procedures/guidelines, that I may lose the privilege to participate on the school team.

Parent/Guardian & Student Athlete - Informed Consent & Acknowledgment of Risk

I acknowledge that there are risks associated with participating in Athletic Activities, and that the measures taken by the schools and participants, including those set out in the Vancouver Board of Education SD#39 COVID-19 Safety Plan and the Return to Sport Plan, will not entirely eliminate those risks.

Participant Name: _____

Participant Signature: _____

Signature of Parent or Guardian: _____

Date: (DD/MM/YYYY) _____

STUDENT-ATHLETE MEDICAL FORM



All information must be completed; a separate form is required for each sport. Eligibility to participate may be withheld if information is incomplete or not submitted.

NAME: _____ D.O.B. (d/m/y): _____

TEAM: _____ GRADE: _____ STUDENT#: _____

ADDRESS _____

PHONE: _____ EMAIL: _____

MEDICAL INSURANCE NO.: (BC Care Card) _____

PARENT/GUARDIAN NAME: _____

ADDRESS: (If different from above) _____

PHONE: (If different from above) _____

CONTACT PERSON IF PARENT UNAVAILABLE: _____

RELATION TO STUDENT: _____

PHONE: _____

PHYSICIAN'S NAME: _____

PHONE: _____

RECORD OF ILLNESS: Indicate those which have occurred at any time, state any illness/injury of past 5 years:

(Check if student has:)

ASTHMA _____ DIABETES _____ HEART CONDITION _____



PAST OR CHRONIC INJURIES (describe): _____

OTHER CONDITIONS OR SURGERY:

LIST ANY ALLERGIES:

LIST ANY MEDICATIONS TAKEN REGULARLY(along with reason):

DATE FORM COMPLETED: _____

CONSENT AND PARTICIPATION AGREEMENT



The Vancouver Board of Education SD#39 is pleased to be reopening youth and children's sports programs for the fall of 2020. This Consent and Participation Agreement provides information about student participation in these Sports Programs, the measures we have put in place to mitigate risks to students, and our expectations of students and parents. Once you have reviewed this form, please ensure that both you, as the parent/guardian, and your student sign and return it to the School.

Your Responsibilities

It is the responsibility of students and their parents and guardians to (1) ensure students are physically and medically fit and able to participate in the Sports Program(s) (and to seek medical advice where appropriate); (2) identify to school authorities activities in which students are unable to safely participate; (3) refrain from any activities or conduct that may place other participants at risk; and (4) comply with Sports Program rules and the directions of teachers and coaches. In the event of any non-compliance with these conditions, students may not be permitted to participate until the non-compliance issues are resolved.

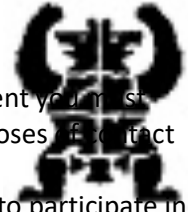
COVID-19 and School Sports

COVID-19 is an infectious disease and managing community transmission of this disease is important. The risk of infection increases when individuals gather together or are in close contact. Infection with COVID-19 may cause serious illness and potentially fatal health consequences.

The School District cannot guarantee that a person (of any age) will not contract COVID-19 while participating in the Sports Program(s), but we have taken steps to develop and implement COVID-19 safety protocols which are intended to reduce risk. Those protocols are available for your review at <https://www.vsb.bc.ca/News/Documents/SafetyPlanProtocols.pdf>. While the School District has implemented preventive measures, the risk remains that a COVID-19 exposure could occur.

It is important that all students and their parents/guardians understand and agree to the following conditions of participation.

- Parents/guardians and students must read and comply with the Safety Policies;
- It is vital that no person who feels sick in any way participates in the Sports Program or enters School facilities, including where they: (a) have experienced cold or flu-like symptoms within the last 14 days; (b) been in close contact with anyone else who has had these symptoms in the last 14 days; or (c) been in close contact with anyone who has travelled outside of Canada in the last 14 days.
- While hygiene will be emphasized, physical distancing amongst the students who participate in the Sports Program(s) may not be possible to achieve or effectively enforce.



- If you or your Child becomes ill within 14 days of attending a Sports Program event you must notify us immediately and we may share your personal information for the purposes of contact tracing if the need arises.
- Students displaying symptoms of respiratory distress or illness will be asked not to participate in the Sports Program.

Nature of the Risks

By signing this Participation Agreement parents and students acknowledge and agree that: (1) they consent to the student's participation in such Sports Program(s) and all related activities, and understand and acknowledge that this may expose the student to risk, including through their attendance and participation in such Sports Program(s), which may include the use of the facilities and lands owned, occupied or used by the School District, (2) the student's participation is and you understand and agree to assume any and all risks associated with his/her participation in such Sports Program, whether or not the School District has disclosed those risks to you, including the possibility of illness (including COVID 19 infection), injury, psychological injury or stress, pain, suffering, permanent or temporary disability, property or economic loss, even death and other unforeseen risks (collectively the "Losses" and each a "Loss").

Emergency Medical Care

In the event of a medical emergency involving the student, the School may arrange to provide care to the student and/or to transport the student to a medical facility. The School District will make efforts to contact parents/guardians in such circumstances, but may, if necessary, make arrangements for the delivery of first aid or medical care to the student before parents are contacted.

General

By completing the document, you acknowledge and agree that: (1) You have read and understand and agree to this this Participation Agreement. (2) You have read the Safety Policies and ensure that you and your student comply with them; (3) You have the legal authority to enter into this Participation Agreement on behalf of your student; (4) You on your own and on behalf of your student voluntarily assume all risks of the Losses described above, including the risk of COVID-19 infection; (3) You consent to the collection, use and disclosure of your personal information and your child's personal information as described above.

I am the parent/guardian of the Participant, and I accept this Agreement on my own behalf and on behalf of my child.

Signature of Parent/Guardian _____

Signature of Student _____

Print Name _____

Print Name. _____