



**Cross Country**  
**Fall 2018 Season**  
**Packet**

## WHEN?

There will be a two day try-out and practice session on Thursday, Aug. 23 and Friday, Aug. 24 for both the boys' and girls' cross country teams.

- Thursday, Aug. 23 4:00 - 5:00 pm, @ Rising Tide
- Friday, Aug. 24 4:00 - 5:30 pm, @ Rising Tide or Morton Park - TBD.

## WHO CAN TRY-OUT?

*Boys & Girls in grades 6 - 12.*

## WHAT DO YOU NEED?

1. Signed athletic participation waiver form.
2. Completed concussion awareness form. Both the student and a parent/guardian must take the NFHS or CDC online concussion course and sign the form as proof of successful completion.
3. Completed pre-participation head injury form. Must be signed by both the student and a parent/guardian.
4. Concussion Impact Testing. This baseline test is useful tool to assist in determining aspects of care in providing those who experience a concussion injury. This test is good for two years. Students will need to follow this link [IMPACT BASELINE TEST \(https://www.impacttestonline.com/htmllauncher/\)](https://www.impacttestonline.com/htmllauncher/) and use the code: **CQPM8GKKMM** . The test will take about 30 minutes. The test needs to be completed using a computer with a mouse. Please email the results upon completion to [mpeterson@risingtide.org](mailto:mpeterson@risingtide.org)
5. Updated physical form on file with the school. **This means you need to have had a physical within 13 months of the last day of the season, and it must be on file in the nurse's office.**
6. Equipment. Students should wear proper running shoes, athletic clothing, and bring a water bottle.
7. User Fee Deposit: A deposit is required to participate in the tryouts. After your child has been assigned to a team, you will be asked to pay any remaining balance if necessary. Here is the fee for each team:

*Varsity Cross Country- \$200.00*

The user fee can be paid through myschoolbucks or by check/money order.

- Credit/debit card - [myschoolbucks.com](https://myschoolbucks.com) in which parents/guardians will need to set up an account with the students name and date of birth.
- Check or money order made out to Rising Tide

The user fee contributes towards transportation, equipment, facility rental, uniforms, and referee costs. If a student is not selected for the team, the deposit check will not be deposited, or a refund will be given, so trying out costs nothing.

Families with two or more children playing in the fall season will receive 25% off each additional child's fee.

**WHAT SHOULD I DO WITH THESE FORMS?**

Please mail, drop off, or email the forms to Rising Tide Charter Public School. 59 Armstrong Rd. Plymouth, MA 02360. Forms can be handed in asap. Please return them to the Main Office or email Mr. Peterson at [mpeterson@risingtide.org](mailto:mpeterson@risingtide.org).

**More Details:**

- A Voluntary summer cross country training program will be available on the athletics section of the Rising Tide Athletics Page ([risingtide.org](http://risingtide.org)).
- Regular practices will start at Rising Tide. Wednesday's are listed as no practice days, but may become rescheduled practice or meet days if there are any postponements or weather cancellations. There are meets or events that take place on weekends. Please refer to the athletics calendar for the schedule.
- You can view the Cross Country schedule through our google calendar link on our athletics page at [risingtide.org/athletics](http://risingtide.org/athletics). There are scheduled Saturday meets and invitationals. Updates on the athletic calendar will occur daily if necessary.
- A Parent communication email will be developed. Any sudden changes in schedules (such as a snow/rain cancellation), or setting up a daily carpool list will be sent out via this email blast. Please list the email addresses you would like to be part of this list if your child is participating on the Cross Country team.

email: \_\_\_\_\_

email: \_\_\_\_\_

email: \_\_\_\_\_



RISING TIDE ATHLETIC PARTICIPATION WAIVER 2018-2019

Name of Student \_\_\_\_\_ Grade \_\_\_\_\_ Home Phone # \_\_\_\_\_

Address \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Emergency Contact Person \_\_\_\_\_ Relationship \_\_\_\_\_

Emergency Contact Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Participation in athletics can result in serious injury, even when measures have been taken to ensure safety. In the event of an injury the school will provide first aid, but all other treatment is the responsibility of the parent/guardian. Participating on an athletic team/club at Rising Tide is not required, and students do so on a voluntary basis with the permission of their parent(s) or guardian(s).

Families are required to pay a user fee for each season. If a student is removed from the team/club before the conclusion of the season for any reason, Rising Tide has the right to keep the entire user fee.

Rising Tide will use buses and/or parent carpools to transport students to and from practices and games. By signing this waiver you are permitting your child to ride in a private vehicle driven by another student's parent or guardian as well as a bus chartered by the school.

All uniforms are property of Rising Tide and should be returned to the school at the end of the season or the family will be charged for the replacement cost.

A student may be removed from team at any point in the season if the grade-level team determines it is necessary. Students can be dismissed from a team/club for both academic and non-academic reasons.

A student will not be permitted to participate in any activities until s/he has a physical form on file with the school which has been completed within 13 months of the tryout date. A completed concussion awareness form, pre-participation head injury/concussion reporting form, and user fee must also be submitted before a student is allowed to participate in the tryout.

I hereby give permission for \_\_\_\_\_ to participate in the Rising Tide Athletics program.

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

\_\_\_\_\_  
Date



## CONCUSSION AWARENESS FORM

Dear Parents/Guardians:

As the prevalence and dangers of head injuries in athletics have become more evident, it is important for both student-athletes and their families to have a greater understanding of the issue. For the safety of our student-athletes, Rising Tide Charter Public School is requiring that both parents/guardians AND the student complete ONE of the following free online concussion courses. The completion of this course is required before your child tries out for an athletic team at Rising Tide. **It must be completed once per school year.**

Complete one of the online courses on concussion/head injuries. It should take less than 30 minutes to complete the course, including registration. **Please print a copy of the completion certificate and turn it in with this packet.**

- National Federation of High School Coaches Course, *Concussion In Sports - What You Need To Know. Create a sign in if necessary.*

<https://nfhslearn.com/courses?searchText=Concussion>

OR

- Centers for Disease Control Course, *Heads Up Concussion In Youth Sports*

[http://www.cdc.gov/concussion/HeadsUp/online\\_training.html](http://www.cdc.gov/concussion/HeadsUp/online_training.html)

Signing below acknowledges that you have successfully completed one of the online free sports concussion awareness courses.

Student-Athlete Name \_\_\_\_\_ Sport(s) \_\_\_\_\_

Student-Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

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



**PRE-PARTICIPATION HEAD INJURY/CONCUSSION REPORTING FORM FOR  
EXTRACURRICULAR ACTIVITIES**

This form should be completed by the student's parent(s) or legal guardian(s). It must be submitted to the Athletic Director in the Try-Out Packet prior to the start of each season a student plans to participate in an extracurricular athletic activity.

Student's Name	Sex
Date of Birth	Grade
School	Sport
Home Address	Primary Telephone

**Has student ever experienced a traumatic head injury (a blow to the head)? Yes / NO**

If yes, when? Dates (month/year): \_\_\_\_\_

**Has student ever received medical attention for a head injury? Yes / No**

If yes, when? Dates (month/year): \_\_\_\_\_

If yes, please describe the circumstances:

**Was student diagnosed with a concussion? Yes\_\_\_\_\_ No\_\_\_\_\_**

If yes, when? Dates (month/year): \_\_\_\_\_

Duration of symptoms (*such as headache, difficulty concentrating, fatigue*) for most recent concussion: \_\_\_\_\_

Parent/Guardian:

Name: \_\_\_\_\_ Signature/Date \_\_\_\_\_

Student Athlete:

Signature/Date \_\_\_\_\_