

Gravette School District



2024-2025

**Extracurricular Standards of Behavior
and
Athletic Participation Packet**

Gravette Public Schools Athletic Handbook

The athletic department of Gravette Public Schools is dedicated to the development of the total student athlete. It is our desire that every student who participates has a meaningful experience. The pursuit of excellence is fundamental to athletics, and our coaching staff is encouraged to maintain a high level of expectation for our athletes in their conduct on the field, off the field, and in the classroom. Under our athletic philosophy, each head coach has the authority to create team rules that are specific to his or her sport; however, there are several rules and policies that are universal. The following is a list of some important rules and policies of our athletic department that students and their parents should understand. These rules and policies apply to all athletic teams.

We are excited about having you participate in the athletic program. The coaches, sponsors, administration, and school board are in agreement on these policies because we believe they will set the tone that will enable you to develop the discipline and pride necessary to have a successful program. We look forward to working with you in the best interest of all our athletes.

SPORTS OFFERED BY SEASON IN GRAVETTE ATHLETICS

<u>Fall Season</u>	<u>Winter Season</u>	<u>Spring Season</u>
Football	Boys Basketball	Baseball
Girls Golf	Girls Basketball	Softball
Boys Golf	Cheerleading	Girls Track
Volleyball	Boys Wrestling	Boys Track
Cheerleading	Girls Wrestling	Girls Soccer
Cross Country		Boys Soccer

ATHLETIC ELIGIBILITY RULES

1. Meet all Arkansas Activities Association requirements.
2. All students are eligible to try out for the sports offered. Tryouts are held and cuts may be made.
3. Good discipline in the classroom, on and off campus, and at school-sponsored events must be maintained to remain in the athletic program.
4. Students are approved for all athletic participation on the basis of interest, athletic ability, and desire. For the athlete to maintain status as a team member, all requirements must be met and followed.

REQUIREMENTS FOR ATHLETIC PARTICIPATION

1. A student promoted from sixth to seventh grade automatically meets scholarship requirements.
2. Second semester seventh grade students and all eighth and ninth grade students meet scholarship requirements for junior high if they have passed four academic courses the previous semester, three of which shall be in the core curriculum areas of math, science, social studies, and language arts and have maintained a 2.0 grade point average in all academic work.
3. All varsity athletes are required to have earned a minimum grade point average of 2.0 and passed four academic classes the previous semester.
4. Athletes are required to have a current, documented physical examination by a licensed physician prior to participating in any practice or athletic contest.
5. Athletes are required to attend and participate in all scheduled practices. Exceptions can be made in accordance with the student handbook policy 4.7- Excused Absences.
6. Athletes are required to attend a full day of classes the day of an athletic contest. Athletes not attending all classes will not be allowed to compete in that day's contest. The only exceptions will be medical appointments with a physician release, immediate family funeral, and school sponsored activity.
7. Athletes will be required to ride as a team to and from all out-of-town contests on school sponsored transportation. In some circumstances, athletes may be released to parents who have signed a release with the head coach.
8. Athletes will be required to sign via Dragonfly acknowledging that they and their parents have read and agree to the athletic handbook.

ATHLETES RESPONSIBILITIES

1. Participation in the athletic program is a privilege, NOT a right.
2. Athletes are expected to be neat in appearance and dress.
3. Athletes are expected to behave themselves in the classroom as well as on the field or court.
4. Athletes will show respect to teachers, coaches, and administrators.
5. Athletes will take care of facilities and equipment belonging to Gravette Public Schools.
6. Inappropriate conduct by our athletes will not be tolerated.

ATHLETIC POLICIES

1. Athletes assigned to In-School-Suspension may participate in practice after school hours during the suspension.
2. Athletes assigned Out-Of-School Suspension will not be allowed to participate in practices or athletic contests during the suspension.
3. Any athlete removed from activity due to a medical condition must have a written and signed release from the physician to return to active participation.
4. Equipment issued to an athlete is the responsibility of the athlete and must be returned in the same condition it was issued. Any damage or lost equipment will become the financial responsibility of the athlete.
5. Any athlete who quits or is removed from a team after the midpoint of the season will remain in that class and be required to serve in any manner as determined by the head coach. The athlete will not be allowed to participate in another sport until that season has terminated.
6. All athletes must participate in the Off-Season program the previous semester with the exception of the spring sports.
7. Athletes are encouraged to participate in as many programs as their studies, time, and talent will permit.
8. In the event an athlete must be removed from a team for disciplinary reasons, the coach of that team will contact the parents and inform them of the reason for the dismissal. Coaches will attempt to contact the parents before meeting with the athlete about the dismissal; in some situations this may not be possible. In these situations, the parent will be notified as soon as possible.

GRADE CHECKS

The Gravette Athletic department in their attempt to improve the academic achievement of their athletes will check the academic progress of each athlete periodically throughout the school year. In two-week intervals the head coach of each sport will contact the athlete's teachers and have them complete a form describing the student's performance in each of their classes. A report will be made to the athletic director by the head coach of each sport concerning any athlete that might be in academic distress or any other classroom problems. Steps will be taken to help any athlete who is having problems academically or in the classroom to alleviate the area of concern.

TOBACCO, ALCOHOL, VAPING, DRUG POLICY

All athletes will refrain from the use or possession of tobacco, alcohol, vaping and illegal drugs and the misuse of prescription and over-the-counter drugs and inhalants in and out of season. Violations will be determined only from first hand information provided by school personnel, a recognized authority, or the individual in question.

Violations in this policy may result in:

Tobacco, Vaping and Alcohol

1st Offense-

1. Suspension from participating in athletic contest for 10% of the Season.

2nd Offense-

1. Suspension from participating in athletic contests for 50% of the season.

3rd Offense-

1. Dismissal from the athletic program for 365 days.

Two offenses in a 365 day period will lead to dismissal from the athletic program for 365 days.

Appeal Process: The following steps must be followed to appeal the suspension or dismissal involving tobacco, vaping or alcohol.

Step 1. The parent must contact and have a meeting with the athletic director or their designee to discuss the suspension/ dismissal

Step 2. The parent must set up a meeting with the principal or their designee in in the building in which the athlete attends school.

Step 3. The parent must make an appointment with the superintendent of schools or their designee.

Step 4. The parent must arrange through the administration office for a hearing with the Gravette Board of Education. Decisions of the Gravette Board of Education are final and there are no other appeals.

The suspension or dismissal may be modified at any step in the appeal process, if approved by the administrator's immediate supervisor. These steps carry forward from seventh through twelfth grade.

Drugs

1st Offense-

1. The parent and the student will be notified of a positive test. Administration will not inform anyone except the parent and the student. The administration will communicate with the parents and counsel with the student.
2. The student will be on probation from Arkansas Activities Association sanctioned activities for thirty days. After thirty days the student may be tested again at his/her own expense and a written copy of the results will be given to the administration and to the parents. If the test is negative, probation will be lifted. If the test is positive, the student will not be allowed to continue in any extracurricular activity for 365 calendar days. To gain eligibility for an extracurricular activity the next year, a student must have a Urine Drug Screening Test. The test must be administered by a testing agency at the student's expense.
3. An exception to the consequences of a positive test may be in the case of steroids, or similar chemicals that would take more than twenty days to leave a student's system. In this case a written opinion from a physician licensed to practice medicine in Arkansas will be required for the student to remain in any eligible activity. Any cost of obtaining such an opinion shall be at the student's expense.
4. A positive test result shall not be provided to the police or other law enforcement agencies and shall not, in itself, be grounds for disciplinary action against the student other than the process described above.
5. Parents of students who are not involved in any extracurricular activity will be notified if their child has a positive test.
6. If a student's drug test is inconclusive he/she will be retested at the school's expense.

2nd Offense-

1. Suspension from the athletic program for 365 calendar days. A negative drug test will be required for reinstatement.

These offense steps carry forward from seventh through twelfth grade.

SOCIAL MEDIA

All stakeholders in the athletic program (coaches, student-athletes, parents) should realize that different forms of social media might be used to communicate program information. These may include, but are not limited to, Facebook, X, Instagram, personal websites, etc. Student-athletes should understand that these platforms are worldwide and can be monitored by anyone, including current and future employers, colleges and universities, and prospective coaches who may be recruiting. Comments or pictures posted by the student-athlete should take this into account.

Student-athletes should refrain from posting comments or pictures that are not conducive to positive team chemistry or could constitute a violation of team rules or the rules contained within this student-athlete handbook. If you have questions about the appropriateness of comments or pictures you may visit with your coach or the athletic director for guidance.

ATHLETIC AWARDS

The head coach of each varsity sport will have the opportunity each year to present awards to members of their team at the annual athletic banquet. These awards will be at the discretion of the head coach of each varsity sport.

The Gravette Athletic Department will present team and individual awards for the following achievements:

Banners Presented for Team:

1. Conference championships
2. District tournament championships
3. Regional tournament championships
4. State quarter-finalist or better
5. State championships

4'x 6' Team Picture:

1. Team state championships

11"x 16" Plaque:

1. Individual state champions

The Silver and Gold Lion awards are special awards presented to our athletes who participate in multiple sports. For an athlete to be eligible for these awards they must meet the following criteria:

Silver Lion:

1. An athlete must participate in the same two sports for all three-varsity years.

Gold Lion:

1. An athlete must participate in the same three or more sports for all three-varsity years.

PROTOCOL FOR COMPLAINTS

The following order must be adhered to when filing a complaint, by calling and making an appointment with:

1. The Coach that had direct supervision of the athlete.
2. The Head Coach of that sport.
3. The Athletic Director for the school district.
4. The Principal of the building where the student attends.
5. The Superintendent of the Gravette Public Schools.
6. The Board of Education of the Gravette School District.

Instructional time, including immediately before and after games and practices, should not be interrupted.

SCHOOL INSURANCE

Any student participating in extracurricular activities are required to carry student insurance. The school provides an opportunity for parents to purchase an insurance policy. This policy is only a supplemental policy and will only cover a small percentage of any medical bills. Information concerning this insurance can be found on the school website.

If you wish, you may purchase this same coverage on a 24 hour, twelve-month basis. Also, you may purchase additional coverage from this carrier.

In the event that your child is injured, it is your responsibility to secure and file a claim form in a timely manner. Claim forms are available at the administration office of the school district.

It is also important for you to know that Arkansas law declares that school districts are immune from tort liability and from suit for damages.

Gravette

CONCUSSION INFORMATION AND MANAGEMENT

Gravette Public Schools recognizes that a concussion is a mild traumatic injury to the brain. Gravette Public Schools seeks to provide a safe return to activity for all athletes after injury, particularly after a concussion. This concussion management plan was created in order to effectively and consistently manage concussions, and ensure that concussed athletes are identified, treated, and referred if needed. Athletes must be symptom free before and after completing a 5-day return to play protocol before returning to activity.

Concussion Definition

A concussion is a mild traumatic brain injury that occurs when the brain shakes violently inside the skull causing an injury to the brain. When this happens, it can damage brain cells causing chemical changes in the brain. Those chemical changes to the brain can cause temporary problems with headaches, concentration, memory, judgment, balance, and coordination.

Although a blow to the head usually causes concussions, concussions can also occur when the head and/or body are violently shaken. These injuries can cause a loss of consciousness, but most concussions do not. Because of this, some people have concussions and don't realize it. Concussions are not uncommon, particularly if you play a contact sport, such as football, but every concussion injures your brain to some extent. This injury needs time and proper management to heal properly. Most concussions are mild, and patients usually recover fully

The important thing is that this injury has time and proper management to heal. An athlete who is still experiencing symptoms following a concussion should never return to play. By returning to play too early, the student-athlete significantly increases the chances of having Post-Concussive complications.

Potential Concussion-Related Complications

Second Impact Syndrome (SIS) is a condition in which the brain swells rapidly and catastrophically after a person suffers a second concussion before symptoms from an earlier one have subsided. This deadly second blow may occur minutes, days, or weeks after an initial concussion, and even the mildest grade of concussion can lead to SIS. This condition is often fatal, and almost everyone who is not killed is severely disabled.

Post Concussion Syndrome is a complex disorder in which a variable combination or post-concussion symptoms – such as headaches and dizziness – last for weeks and sometimes months after the injury that caused the concussion. In most cases, post-concussion syndrome symptoms occur within the first 7-10 days and go away within three months, though they can persist for a year or more. Post-concussion treatments are aimed at easing specific symptoms.

Long Term Cognitive Disabilities can be caused by even the mildest of concussions and can lead to long-term disabilities or effects. These may include diminished senses, memory loss, and behavioral changes. This is especially true when the concussions are sustained within a short passage of time.

Signs and Symptoms of a Concussion

Physical		Cognitive	Emotional	Sleep
Headache	Pressure in head	Feeling mentally foggy	Irritability	Drowsiness
Light Headedness	Dizziness	Feeling slowed down	Sadness	Sleeping less than usual
Balance Problems	Neck Pain	“Don’t feel right”	Nervousness	Trouble falling asleep
Sensitivity to light	Sensitivity to noise	Difficulty concentrating	Behavioral changes	Sleeping more than usual
Numbness/tingling	Fatigue/Tired	Difficulty remembering	More emotional	
Ringing in the ears	Nausea/Vomiting	Confusion	Anxious	

Gravette Public Schools Concussion Management Plan

Before ANY student can participate in athletics, the parents/guardian MUST sign the pre-participation forms with concussion information.

Once an athlete sustains a mechanism of a concussion with subsequent symptoms:

1. The athlete will not be allowed to return the same-day, and the Athletic Trainer, coach, and parents should all be notified immediately.
2. The athlete MUST be evaluated by a licensed healthcare professional (Athletic Trainer, MD, DO, or any other Physician) experienced in the evaluation and management of concussions.
3. The student athlete will perform a battery of tests including a SCAT-5 and VOMS, and within 24-48 hours the athlete will take a computerized neurocognitive test (Sway).
4. Athletes must be symptom free for a minimum of 24 hours (without the use of medication) before beginning the Gradual Return to Sports Participation Protocol (GRTP).
5. If an athlete was to see a licensed healthcare provider other than the Athletic Trainer, then they must bring written documentation of medical clearance prior to starting any steps that involve contact in the GRTP.
6. Even if written documentation of medical clearance was received, if the Athletic Trainer does not feel as though the athlete is ready to return-to-play the athlete must wait until the Athletic Trainer releases them to return.

7. Once an athlete has met all the criteria (symptoms free for a minimum of 24 hours with satisfactory test scores), they may begin a 5-day GRTP.
8. The athlete will not be allowed to return to activity until they have completed the 5-day GRTP after a period of asymptomatic 24-hours.
9. The 5 step (day) GRTP:
 - Student athlete must exhibit a resolution of concussion symptoms back to or near pre-injury baseline levels for a minimum of “24 hours” prior to the student athlete being cleared by their QHP to initiate and proceed through the GRTP.
 - If school is in session: the student athlete that has been diagnosed with a concussion MUST attend a FULL DAY of school (within the normal school year) without symptoms or classroom modifications prior to that athlete beginning the GRTP (student athletes that are only attending a partial day or currently have classroom modifications in place due to their concussion are not eligible to begin GRTP).
 - If school is not in session: (Summer, Fall, Winter, Spring Breaks, AMI or a regularly scheduled non-school day) the GRTP may be administered by the direction of the QHP overseeing the student athlete’s healthcare.
 - There should be at least 24 hours between each step of the GRTP.
 - If any symptoms significantly increase during these activities, stop the workout immediately.
 - The student athlete should then rest until symptoms return back to or near pre-injury baseline levels for 24 hours then return to the previously completed stage of the GRTP.
 - If symptoms persist or worsen, seek medical attention by referring the student athlete back to the QHP that is overseeing their healthcare.
 - Once the student athlete has successfully completed the 5-day GRTP they are eligible to return to full participation on Day 6. (not eligible to return to play on the 5th day of the protocol).
 - In the absence of a Certified Athletic Trainer a designated school employee may administer the GRTP under the AAA Guidelines set forth by this document and following the direction of the QHP in charge of the student athlete’s healthcare.
 - The GRTP paperwork must be fully completed, signed, dated by the individual that completes the step wise protocol.

**RECEIPT OF NOTICE FORM FOR STUDENTS INVOLVED IN
EXTRACURRICULAR ACTIVITIES**

By my signature below, I affirm that I understand all students involved in extracurricular activities are required to carry student insurance. Parents or guardians that do not want school insurance must sign the below waiver indicating that their child is covered by their individual policy. It is also important to know that Arkansas state law declares school districts are immune from tort liability and from suit for damages.

Student's Name

Parent/Guardian Signature

Date

I have read and understand the rules and policies of the athletic handbook.

Parent Signature

Date

Student Signature

Date

ACKNOWLEDGEMENT OF WARNING STATEMENT

By Parents:

I/We, the parent(s) of _____ do hereby acknowledge that I/We have been fully advised, cautioned and warned by the proper administrative and coaching personnel of the Gravette School District that my/our child named above may suffer serious injury, including but not limited to sprains, fractures, brain damage, paralysis, or even death, by participating in the sport(s) of _____.

Notwithstanding such warnings, and with full knowledge and understanding of the risk of serious injury which may result to my/our child named above, I/We give my/our consent to _____ participating in the sport(s) of _____.

Name of Child

I/We agree that the terms hereof shall serve as an **ASSUMPTION OF RISK** and a **RELEASE** for all members of my/our family, for my/our heirs, estate, executor, administrators, assignees, indemnities, subrogates, or other releases; and I/We further agree that if any part of this **ASSUMPTION OF RISKS AND RELEASE** is held void, the remainder shall continue in full force and effect.

Parent Signature

Date

By Student:

I, _____, hereby acknowledge that I have been properly advised, cautioned and warned by the proper administrative and coaching personnel of the Gravette School District that by participating in the sport(s) of _____ I am exposing myself to the risk of sprains, fractures, ligament and/or cartilage damage, paralysis, or even death. Having been so cautioned and warned, it is still my desire to participate in the above sport(s), and should I choose to participate in the above sport(s), I hereby further acknowledge and understand the risk of serious injury to which I am exposing myself by participating in the above sport.

I agree that the terms hereof shall serve as an **ASSUMPTION OF RISKS** and a **RELEASE** for all members of my family, for my heirs, estate, executor, administrators, assignees, indemnities, subrogates, or other releases; and I further agree that if any part of this **ASSUMPTION OF RISKS AND RELEASE** is held void, the remainder shall continue in full force and effect.

Student Signature

Date

Photo Consent Form

Gravette High School Athletics (“GHSA”) and the Gravette High School Athletic Booster Club regularly produces photographs of people in its publications, promotional and marketing material and on its website in order to promote GHSA to the high school community and public.

GHSA would like to be able to use and reproduce in print form and/or electronically one or more photographs of you and/or your son/daughter for this purpose and is seeking your consent to do so. The photographs will appear at, or will be accessible from the GHSA website located at: lions.k12.ar.us/athletics.

Photographs of you that are sufficiently clear to identify you are considered “personal information” and Gravette School District would like permission to publish these photos along with your first and last name.

If you and your parents agree to GHSA using your photograph/s in this way, please sign below where indicated.

I agree to GHSA using, reproducing and disclosing the photographs of myself and/or my son or daughter in the manner explained above.

Parent Signature: _____

Parent Print Name: _____

Athlete Signature: _____

Athlete Print Name: _____

Date: _____

Authorization of Certified Athletic Trainers to Provide Healthcare

Certified Athletic Trainer

I understand that the Athletic Trainer may provide healthcare to student athletes. This includes evaluating and treating the athlete. It may be necessary to share healthcare related information with the physicians, coaching staff and the school administration. I also understand that the Athletic Trainer has final authorization of return to play for the athlete.

By signing, I authorize the Athletic Trainer to share, when necessary, healthcare-related information for _____ (student name) with the physicians, coaching staff and school administration.

Student Name – Printed

Date

Signature of Parent or Legal Guardian

Date

EMERGENCY TREATMENT

EMERGENCY CONTACT INFORMATION

Athlete Name: _____ Sport: _____ Sex: M _____ F

Grade: _____ Age: _____ Date of Birth: ____/____/____

Parent Names:

Home Address:

Father's Phone Number: _____ Mother's Phone Number:

Father's Work Name & Address:

Mother's Work Name and Address:

Father's Work Phone Number:

Mother's Work Phone Number:

Another Person to Contact:

Relationship: _____ Phone Number: _____

Insurance Name:

Policy and Group Numbers: _____

ALLERGIES:

Consent Statement: Authorizing Treatment

Parent's Signature:

**Gravette Public Schools
CONCUSSION INFORMATION AND MANAGEMENT**

By signing below, I acknowledge that I have received and reviewed the attached Concussion Information and Management Plan packet. I also acknowledge and I understand the risks of brain injuries associated with participation in school athletic activity.

Athlete's signature

Print Name

Date

Parent / Guardian Signature

Print Name

Date

Health Builders
Clinic of Chiropractic
Dr. Ty Russell, D.C.

207 Atlanta St. SE (Hwy 72)
Gravette, AR 72736
Phone (479) 787-7555
Fax (479) 787-7444

Dear Parents,

If you would like your athlete (s) to be part of our “STAY STRONG” program that we are providing for the **Gravette High School** athletes again this season, please fill out the bottom of this letter & return it to the Athletic Department as soon as possible.

We look forward to doing our part in keeping everyone healthy & injury free on the way to another successful season.

Sincerely,

Dr. Ty D. Russell, DC

I give permission as parent/legal guardian to Dr. Ty D. Russell, DC to treat my son / daughter & to share any medical information with any necessary Health Care Provider (Athletic Trainer, MD, PT, etc.) to help my athlete stay healthy.

This service is provided to the student at the school at prearranged times, at no charge. **Any treatment at the office will be charged *regular office fees***, unless directed by the athletic trainer.

Student Name

Parent Signature

Date _____