

Do you want to be cleared for Fall sports on time?

Then come to the 2nd annual
Athletic Form Submission Nights

Completed sports forms will be reviewed by the school medical inspector and school nurses. **Please note physicals will not be done at this time.** It is for paperwork submission only and does not include eligibility credit check for participation. Please plan approximately an hour of your time to complete the medical clearance process.

June 24, 2009 or July 22, 2009

On Either Night

Boy/Girl Soccer	5:00 PM – 5:45 PM
Girl's Tennis & Girl's Volleyball	5:45 PM – 6:30 PM
Cheerleading, Football & Gymnastics	6:30 PM – 7:15 PM
Boy/Girl Cross Country & Field Hockey	7:15 PM – 8:00 PM

Bring all completed Fall athletic forms to the Commons cafeteria, including:

_____ **Health History Questionnaire Form**- to be completed by parent or guardian [**Part A Form**]. Required for **each sport season**. Must be signed and dated within **60 days** prior to the first practice session.

_____ **Medical Examination Form-completed by the Medical Home. [Part B Form]**. **Required once per year**. Each candidate for a place on a school athletic squad or team must provide a written report of a medical examination **Athletic Pre-Participation Physical Examination Form [Part B Form]** by their family physician [**medical home**], nurse practitioner or physician's assistant certified within **365 days** prior to the first practice session. If you do not have a medical home, you may contact the health office at 284-7143/7394 for 11/12 and 284-7140/7235 for 9/10.

_____ **HCRHS Athletic Participation/ Parent Permission Form**. Required for each sport season.

_____ **Student Random Drug & Alcohol Consent to Test Form**. Forms are good for the **entire four years** of high school athletic participation.

_____ **NJSIAA Steroid Testing Form**. Forms are **good for only one (1) year** of high school athletic participation (a **new signed form** must be handed in **every year**)