

Interscholastic Athletic Program

For 5th – 12th grade students

After-school Sports offered	Fall: 5th-12th grade soccer Winter: 5th-12th grade basketball; 9th-12th grade cheerleading Spring: 9th-12th grade baseball and softball
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Most of our after-school, interscholastic, sports activities require a commitment of after-school hours for four days a week during the season for that sport. Days involved are Monday, Tuesday, Thursday, and Friday. If there isn't a game scheduled, then a practice session often is then scheduled.

During the school year, information on the athletic schedule for the season will be sent home with the athlete and can also be found on InfoDirect (*our school's online information system*).

Please note – Home school students who wish to play an after-school sport will need to pay a \$150 sports fee.

If your child, enrolling in 5th through 12th grades, desires to play an after-school sport, a special sports physical form is required by the State of New Jersey. The Annual Athletic Pre-Participation Physical Examination (PPE) form must be received in its entirety in order for a student to be able to participate in either the sport or in its pre-season training. The physical form is good for one year. If the physical (good for one year) expires during the season, the student will be required to stop the sport until a new physical is completed.

Although a concussion baseline testing is not mandatory, it is encouraged by our school nurse. If you decide to have your child obtain one and your doctor is not equipped to complete this test as part of the physical, individual appointments can be made at Cooper Bone and Joint, 900 Centennial Boulevard, Building 2 Suite 203 Voorhees. (856.673.4914)

NJ requires athletes and parents to read the following information:

Sudden Cardiac Death in Young Athletes Pamphlet:

<http://www.state.nj.us/education/students/safety/health/services/cardiac.pdf>

Concussion Policy Acknowledgment Form:

www.state.nj.us/education/aps/cccs/chpe/concussions/fact.pdf

Sports-related Eye Injuries: An educational Fact Sheet for Parents:

<http://www.state.nj.us/education/students/safety/health/SportsRelatedEyeInjury.pdf>

To print the Preparticipation Physical Evaluation (PPE) Form:

<http://www.state.nj.us/education/students/safety/health/records/athleticphysicalsform.pdf>

Fact sheet regarding the PPE Form:

[Scholastic Student-Athlete Safety Act Information Fact Sheet for Parents/Guardians](#) (Word

*Please print, sign & return the following Parental Sign-Off Sheet form
with your sports physical (PPE) Form.*

State of New Jersey

Department of Education

Parental Sign-Off Sheet

School: Baptist Regional School, Haddon Heights, NJ

___ We acknowledge that we have received and reviewed the
Sudden Cardiac Death in Athletes Pamphlet.

___ We acknowledge that we have received and reviewed the
Concussion Policy Pamphlet.

___ We acknowledge that we have received and reviewed the
Sports-Related Eye Injuries Educational Fact Sheet for Parents.

Student Signature: _____

Print Name: _____

Parent/Guardian Signature: _____

Print Name: _____

Date: _____