

[This form is to be on file both at school and with the player/parent)

D.A.L.S. Code of Ethics
for Coaches, Players, and Parents

Christian love, sportsmanship and forgiveness are priorities in the athletic programs of our Lutheran schools. In an effort to unify the Denver Area Lutheran Schools (D.A.L.S.), the Athletic Directors have adopted the following Code of Ethics.

1. We encourage full participation by all students in practice and game situations.
 2. We will treat all players, coaches, officials, parents, and administrators with respect and dignity.
 3. We will do our best to learn the fundamental skills, rules, and strategies of the sport.
 4. We will uphold the authority of the officials of the contests in which we participate.
 5. We expect the athletes, coaches, and spectators to win graciously and with equal consideration for the losing team. If they lose, we want them to make the most of the opportunity to teach the qualities mentioned.
- VIOLATION OF THIS CODE MAY REQUIRE SOME FORM OF DISCIPLINE, SUCH AS A VERBAL WARNING, REMOVAL FROM THE GAME, OR AN INDEFINITE SUSPENSION FROM ALL D.A.L.S. ATHLETIC EVENTS. VIOLATIONS WILL BE REVIEWED BY THE LEAGUE COMMISSIONERS OF THE D.A.L.S. TO DETERMINE SANCTIONS AS NECESSARY.**
- FINALLY, we remember that we can never achieve perfection, but we will strive to be forgiving and encouraging at all times.

We, the undersigned, agree to abide by the D.A.L.S. Code of Ethics.

_____ Athletic Director	_____ Principal
_____ Coach	_____ Coach
_____ Player	_____ Parent

Student name:	Parent/Guardian
Sport:	Home #: Work #
Grade:	Address: City: _____ Zip: _____

Bethlehem Lutheran School
Parent Permission for Athletic Participation

1. Before an athlete is permitted to participate in the Bethlehem Lutheran School athletic program this permission must be signed for each sport and on file with the school.
2. Bethlehem Lutheran School is relieved of any and all liability for accidents or injuries connected in any way with the competitive athletic program.
3. It is the responsibility of the parent/guardian to provide insurance protection for the athlete while participating in competitive sports.
4. Bethlehem Lutheran School makes available student insurance plans which offers coverage for any accident or injury resulting from participation in competitive sports. (Check with the office.)
5. If the school is not taking a bus for an away event, you are responsible to provide a ride for your child. If your child is riding with an adult other than yourself, they should have a note to inform the teacher and office.

NOTE: Although participation in supervised school athletic and activities programs are among the least hazardous events in which any student will engage either in or out of school, the very nature of these school athletic and activities programs does create potential for injury. Parents should be aware that the chance of injury is present while students are participating in school athletics and activities and should understand this includes a risk of injury that may range in severity from minor to long term catastrophic up to and including death. Those parents who do not wish to expose their son/daughter to this possibility should not sign this permission form.

I hereby give my consent for _____ to compete in athletics at Bethlehem Lutheran School for the **sports circled:** soccer, volleyball, basketball, track, cheerleading.

Date: _____ Signed: _____

PHYSICIAN STATEMENT FOR ATHLETIC PARTICIPATION

I hereby certify that I have examined _____
and that the student was found physically fit to engage in soccer,
volleyball, basketball, track and cheerleading. **(Please cross out those
in which the student should NOT participate.)**

Date: _____ Signed: _____
Valid 365 days unless rescinded. Physician, Physician Assist. Or Nurse Practitioner

SUMMARY INFORMATION FOR PHYSICIAN

No pupil shall represent his/her school in inter-school athletics until there is a statement signed by his parent(s) or legal guardian and a practicing physician that he/she has passed an adequate physical examination within the past year; that in the opinion of the examining physician he/she is physically fit to participate in athletics; and that he/she has the consent of his/her parent(s) or legal guardian to participate on file with the school.

NOTE: It is strongly recommended by the Colorado Department of Health that individuals participating in athletic events have current tetanus boosters. Tetanus boosters are recommended every ten years throughout life. Boosters are recommended at the time of major injury if more than five years have elapsed since the last booster.

If significant intervening illnesses and/or injuries have occurred, a more complete physical examination should be conducted. A practicing physician must sign the physical examination.

If a student has been injured in practice or competition, the nature of which required medical attention, the student athlete should not be permitted to return to practice and/or competition until he/she has received a release from a practicing physician.

NOTE: I fully understand that Bethlehem Lutheran School does not provide any accident or health insurance for my son/daughter while participating in interscholastic sports. I fully understand that it is my responsibility to provide insurance coverage for my son/daughter.

Date: _____ Signed: _____
Parent

STUDENT PASSENGER OF PRIVATE VEHICLE TRANSPORTATION

I am aware that my son/daughter may be riding to a scheduled athletic event with a "Qualified Driver's Certificate" driver who has a valid driver's license and insurance verification on file in the school office.

_____ My child has permission to ride with a "Qualified Driver".

_____ My child does not have permission to ride with a driver other than myself.

Date: _____ Signed: _____
Parent/Guardian Signature

