MANAGER PACKET

ATHLETIC ELIGIBILITY FORM							
Please check one: Barnegat High School Russell O. Brackman Middle School Robert L. Horbelt School							
M.A.T.E.S Performing Arts Academy Home Schooled							
I. Student Information (Please complete this section.) Name: Home Phone:							
Last	First		Middle	Home Phone: Emergency Contact:			
Address:					ergency Phone:		
Street Town, State Zip							
Are you a transfer student? □ Yes □ No If yes, date of transfer: Previous school: Date of Birth: Sex: M F City and State of Birth:							
Date of Birth: Sport by Season:		Sex: M	F City and S	state c	or Birth:		
I " "	pring:	Grade (Sept.	2023):	Age	e as of August 31, 2023:		
II. Eligibility Information	om (This section	- :- C11-1 4 l	4111>		# 1855 15 15 15 15 15 15 15 15 15 15 15 15 1		
·			1				
	eate S	ignature	Comments		Credits Previous Year: Credits 1st Semester:		
Guidance					(Fall/Winter Seasons) (Spring Season)		
Medical					Physical Date:		
Athletic Office							
Principal							
III. Barnegat Township	Parental Pe	rmission (P	lease read and cor	mnlete	e this section)		
III. Barnegat Township Parental Permission (Please read and complete this section.) 1. I give my son/daughter							
DATE:	DATE: Signature of Parent/Guardian						
DATE:			Signat	ure of S	Student		

Barnegat Athletic Code of Conduct

The following model athletic code of conduct is promulgated in accordance with the provisions of P.L. 2002, chapter 74. **Preamble:**

Interscholastic and youth sports programs play an important role in promoting the physical, social and emotional development of children. It is therefore essential for parents, coaches and officials to encourage youth athletes to embrace the values of good sportsmanship and should lead by example by demonstrating fairness, respect and self-control.

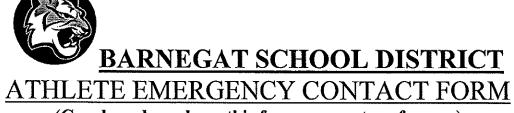
Sportsmanship and sportsman like conduct shall be defined as demonstrating fairness and respect for one's opponent and being gracious whether winning or losing. I therefore pledge to be responsible for my words and actions while attending, coaching, officiating or participating in a youth sports event and shall conform my behavior to the following code of conduct:

- 1. I will not engage in unsportsmanlike conduct with any coach, parent, player, participant, official or any other attendee.
- 2. I will not encourage my child, or any other person, to engage in unsportsmanlike conduct with any coach, parent, player, participant, official or any other attendee
- 3. I will not engage in any behavior which would endanger the health, safety or well-being of any coach, parent, player, participant, official or any other attendee.
- 4. I will not encourage my child, or any other person, to engage in any behavior which would endanger the health, safety or well-being of any coach, parent, player, participant official or any other attendee.
- 5. I will not use drugs or alcohol while at a youth sports event and will not attend, coach, officiate or participate in a youth sports event while under the influence of drugs or alcohol.
- 6. I will not permit my child, or encourage any other person, to use drugs or alcohol at a youth sports event and will not permit my child, or encourage any other person, to attend, coach, officiate or participate in a youth sports event while under the influence of drugs or alcohol.
- 7. I will not engage in the use of profanity.
- 8. I will not encourage my child, or any other person, to engage in the use of profanity.
- 9. I will treat any coach, parent, player, participant, official or any other attendee with respect regardless of race, creed, color, national origin, sex, sexual orientation or ability.
- 10. I will encourage my child to treat any coach, parent, player, participant, official or any other attendee with respect regardless of race, creed, color, national origin, sex, sexual orientation or ability.
- 11. I will not engage in verbal or physical threats of abuse aimed at any coach, parent, player, participant, official or any other attendee.
- 12. I will not encourage my child, or any other person to engage in verbal or physical threats or abuse aimed at any coach, parent, player, participant, official or any other attendee.
- 13. I will not initiate a fight or scuffle with any coach, parent, player, participant, official or any other attendee.
- 14. I will not encourage my child, or any other person, to initiate a fight or scuffle with any coach, parent, player, participant, official or any other attendee.

I hereby agree that if I fail to conform my conduct to the foregoing while attending, coaching, officiating or participating in a youth sports event I will be subject to disciplinary action, including but not limited to the following in any order or combination:

- 1. Verbal warning issued by a league, organization or school official.
- 2. Written warning issued by a league, organization or school official.
- 3. Suspension or immediate ejection from a youth sports event issued by a league, organization or school official who is authorized to issue such suspension or election by a school board or youth sports organization.
- Suspension from multiple youth sports events issued by a league, organization or school official who is authorized
 to issue such suspension by a school board or youth sports organization.
- 5. Season suspension or multiple season suspension issued by a school board or youth sports organization.

PRINT MOTHER'S NAME	MOTHER'S SIGNATURE
PRINT FATHER'S NAME	FATHER'S SIGNATURE
PRINT STUDENT'S NAME	DATE



(Coaches please keep this form on you to reference)

STUDENT INFORMATION:					
Student Name	ndent NameDate of Birth				
Year in School (circle) 6 7 8	9 10 11 12				
Address					
EMERGENCY CONTACT IN	FORMATION:				
Primary Contact Name					
	Primary phone#				
Alternate phone #					
Name of Alternate contact person	n				
Relationship	Phone #				
Alternate phone #					
HEALTH CONDITIONS (CH	ECK OFF ALL THAT APPLY):				
Asthma (Asthma Action Plan 1	nust be on file with the nurse for the current school year)				
Diabetes (Diabetic Medical Ma	nagement Care Plan must be on file with the nurse for				
current school year)					
Epilepsy (Seizure Action Plan	n must be on file with the nurse for the current school year)				
Food Allergies (Food Allergy	and Anaphylaxis Emergency Care Plan must be on file with				
the nurse for the	ne current school year)				
Other (please list)					
	permission for my information to be released for emergency ny of my emergency contacts listed may be notified in an				
Parent Signature	Date				