



**FOOTBALL**  
**MEDICAL LAKE HIGH SCHOOL**  
**SAFETY GUIDELINES**

**STUDENT'S NAME:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_

**(Prior to participating, both the student and parent must read carefully and sign)**

When a person is involved in any athletic activity, an injury can occur, especially in a contact sport. Football is highly competitive, fast action game in which physical contact and collisions play a major role. One should be aware the information presented in these safety guidelines is to inform the athlete of proper techniques and inherent dangers involved with football. There is a chance of broken bones, severe concussions, and back injuries, which could lead to some form of paralysis. Not all potential injury possibilities in this sport are listed, but athletes should be aware that fundamentals, coaching and proper safety equipment are important to the safety and enjoyment of the sport.

1. Proper warm-up is essential before strenuous activity takes place.
2. Proper safety equipment including mouth guards must be worn and used according to instructions given by your coach.
3. If you wear eyeglasses, contact the coach for proper fitting of safety lenses, appropriate frames that are compatible with football helmets
4. Perform only those skills and techniques as instructed and/or supervised by your coach.
5. Be sure all equipment is fitting properly before each day's activity. If any piece of protective equipment does not fit or is damaged, report this condition to your coach immediately.
6. If a piece of equipment becomes damaged or broken during an activity, report to a coach immediately for repair or replacement.
7. Travel to and from off-campus facilities and practice/competition sites must be in accordance with school procedures.
8. Remove all jewelry and metal hair fasteners and other body adornments as required by rules and regulations for football.
9. Be aware of your surroundings both home and away including but not limited to field surface conditions, obstructions in the proximity to the playing field and safe entrance/egress to/from the field and the locker room.
10. Squad members must wear safe and proper fitting footwear. Be cautious when walking on slick surfaces with cleated shoes.
11. Wear outer and under garments appropriate for humidity and temperature.
12. In order to help protect the safety of all squad members, squad members with physically limiting injuries and/or health conditions must inform the coach prior to each day's activity of limiting conditions and participate only to the extent allowed by the coach.
13. Be aware of the potentially serious injuries if you do not follow correct procedures in blocking and tackling.
14. Hydration is essential with frequently scheduled drink breaks during practice and drinks available during all games. Players should hydrate themselves frequently during practice and games and follow the coach's direction on hydration prior to and following practices and games.
15. Notify the coach immediately if injured.
16. Practice only when your coach is present.
17. To prevent unauthorized use, at the conclusion of any practice or game, store equipment in a secure manner as directed by your coach.

Warnings Specific to Football:

Coaches will teach players blocking and tackling techniques that are approved by the National Federation and the WIAA (Washington Interscholastic Activities Association). In addition the following safety warnings are of major importance for player safety.

1. Read all warnings from helmet and safety equipment suppliers prior to the first fitting of equipment.
2. Tackle, block or break tackles with the shoulder pads. NEVER USE THE HELMET TO STRIKE AN OPPONENT.
3. Keep the eyes and chin up when blocking, tackling or running with the ball. Lowering the head/helmet jeopardizes the neck and spinal cord.
4. Block from the front, side and above the waist according to the current rules of football.
5. Do not pile on when an opponent is down.
6. Do not chop block.
7. Do not slash with a rigid arm when executing a tackle.
8. When on the ground, you are vulnerable to being stepped on or receiving a leg, shoulder or knee injury. Get up!
9. If injured and unable to move or movement is limited, stay on the ground until assistance is given to move you or you are capable of getting up without fear of additional injury.
10. Participate fully in all neck strengthening exercises.
11. Strength training is an important part of football. Observe all proper weight lifting procedures including lifting, spotting, storage of weights and general safety.

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The above information has been explained to me and I understand the list of rules, safety regulations/warnings and procedures. I also understand the necessity of using the proper techniques while participating in the football program

\_\_\_\_\_  
Date

\_\_\_\_\_  
Athlete's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Legal Guardian

**FOOTBALL**  
**MEDICAL LAKE HIGH SCHOOL**  
**ATHLETIC MEDICAL RELEASE 2018-2019**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
(Please Print)

**INSURANCE PROTECTION**

Insurance coverage is mandatory for participation in any school activity. Our district's insurance coverage does not provide medical insurance coverage for school accidents. This means you are responsible for the medical bills if your child is hurt during school or school activities. The school's liability coverage will provide protection if the district is found to be negligent in some manner; however, a slip or fall is rarely the fault of the school district. A brochure outlining student insurance is available from the main office.

Please send home a brochure on the insurance program. I will be enrolling my student in this program and I understand my student will not be eligible until the form, with payment, is returned to the school.

OR

We have personal medical insurance and our insurance carrier is: 

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(Name of Insurance Company this is MANDATORY)

**ATHLETIC MEDICAL RELEASE**

In the event of an emergency, authorization is hereby given for any x-ray examination, anesthesia, medical or surgical diagnosis or treatment and hospital service that may be rendered whether such diagnosis and/or treatment is rendered at a local physician's office or licensed hospital. It is understood this consent is given in advance of any specific diagnosis or treatment required, but is given to encourage said physician to exercise his/her best judgment as to requirements of such diagnosis or treatment. This consent shall remain in effect for the current sport season only.

Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_