



## **Mishawaka Christian Athletic Club Handbook Appendix**

### **Parent and Player Packet Forms to submit each year**

#### **Parents:**

- Parent Code of Conduct
- Parent Participation Form

#### **Players:**

- Player Application and Commitment Form
- Player Code of Conduct
- Player Medical Release and Authorization
- Player Pre-Participation Medical History
- Player Pre-Participation Physical Examination

## Mishawaka Christian Athletic Club

### Parent Code of Conduct

We believe that parents have the God given authority over and responsibility for their children. By enrolling your child in this athletic program, you are delegating authority to MCAC and the team coach during practices, games and all other times that MCAC representatives or coaches are responsible for the athletes.

Parents are expected to participate with all diligence, giving their best efforts at all times (from the time their student athlete makes the team roster to the end of the sport's season, including the sport's off season activities) by taking the initiative to:

- Pray for players, coaches and parents.
- Abide by Christ-like principles in conduct as a representative of the Wildcats program.
- Submit the Parent Participation form: Participate in fund-raising projects, serve on committees as needed, volunteer for various tasks to help meet the needs of the organization.
- Attend the required parent meetings and games; and see that their student athlete attends required player meetings, clinics, practices and competitions and ensure they arrive on time.
- Nurture their student's spiritual, physical and emotional development; encourage them to grow spiritually; to be persistent and to work on their skills when not at games or practices,
- Assist the coach by assuring their student athlete adheres to all aspects of the Player Code of Conduct.
- Maintain good communications with coaches and the athletic director regarding practices, games, any issues that may affect their student or others in the program, etc.
- Appeal concerns or problems through the coaches or the athletic director at a private time other than during a game (*see Conflict Resolution section of the MCAC Handbook*).
- Teach your child that an honest effort and playing to the best of their ability is important so that victories can be accepted with humility and losses are accepted graciously; avoid an attitude of "winning at all costs".
- Cheer on their team(s) with great joy and fervor, but refrain from harsh criticism of the team, opponents, coaches, officials and tournament officials, speaking with respect to all adults; refrain from cursing and coarse or foul language.
- Accept the official's decisions at games in the true spirit of sportsmanship. Refrain from showing displeasure toward officials, players, coaches, and the opposing team.
- Accept the outcome of a game in a Christ-like manner.
- Respect facilities and equipment at practices, games, while traveling, or at a host site; and try to leave it in as good or better shape than we found it (taking the initiative to pick up trash, put things back where they belong, etc.).
- Accept responsibility for the proper behavior of their student athlete and their siblings attending any MCAC event.
  - Don't let siblings disrupt games and practices.
  - Ensure siblings are being respectful of facilities and are under adult supervision at all times.
  - If unable to change inappropriate behavior, to then remove their children from the activity.
  - If behavior doesn't improve to then remove their student athlete from participation in the organization so as not to be a detriment to other participants or the organization.
  - If you are unable to accompany your child, you must make specific arrangements with another home schooling parent to be responsible for your child.
- Ensure your student-athlete is in good academic standing.
- Meet financial responsibilities in a timely manner (*no pay-no Play*).

I understand that MCAC is a Christian based organization. I agree to uphold, to the best of my ability, the Parent's Code of Conduct and guidelines set forth in the Handbook. I also understand that my eligibility to participate in MCAC activities can be restricted or withdrawn by my failure to comply with the standards.

Names (*please print*) \_\_\_\_\_

Father's signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's signature \_\_\_\_\_ Date \_\_\_\_\_

## Mishawaka Christian Athletic Club Parent Participation

**Everyone's help is required for the Wildcats organization to succeed.**

*We (parents) realize that the Wildcats organization exists to build Godly character in our athletes and improve athletic skills. MCAC is run by parent volunteers, and we must commit ourselves to assisting in this organization.*

***Many hands make light work!! Where will you serve?***

Parent 1 Name \_\_\_\_\_ Date \_\_\_\_\_

Parent 2 Name \_\_\_\_\_ Date \_\_\_\_\_

Player(s) name(s) \_\_\_\_\_ Year 20\_\_\_\_ - 20\_\_\_\_

*Please select as many as possible per parent (minimum of one per parent required)! These are commitments throughout the sport's season, not just one game.*

**Parent 1      Parent 2**

### ***Game Team -***

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Scorekeeping/Statistics - serve on a rotating team to help your team/coach keep the books/stats (you WILL get training!). |
| <input type="checkbox"/> | <input type="checkbox"/> | Team manager/mom/dad - collect forms, money, orders, organize event/jobs needed.  |
| <input type="checkbox"/> | <input type="checkbox"/> | Lodging - help locate/book hotel accommodations for out-of-town tournaments.  |

### ***Home Game Team -***

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Admission, concession, set-up and clean-up of facility (on a rotating basis). |
| <input type="checkbox"/> | <input type="checkbox"/> | Announcing - announce players and make announcements at home games.           |

<input type="checkbox"/>	<input type="checkbox"/>	<b><i>Fundraising Team</i></b>
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Serve on a team to organize fundraising opportunities for MCAC.

<input type="checkbox"/>	<input type="checkbox"/>	<b><i>Banquet Team</i></b>
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Serve on a team to organize our annual end of the year banquet.

### ***Publicity Team -***

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Photo or Video Historian Team - help document the sport's season, special events. |
|--------------------------|--------------------------|---|

# Mishawaka Christian Athletic Club - *Wildcats*

## Application and Commitment Form 20\_\_\_\_/20\_\_\_\_ Year

*Please print – A form is required for each player*

Player's full name \_\_\_\_\_ ☐ Male ☐ Female  
Address \_\_\_\_\_ City/St/Zip \_\_\_\_\_ Date of birth \_\_\_\_\_  
Player's email address \_\_\_\_\_ Age (as of Sept.1) \_\_\_\_\_ Grade \_\_\_\_\_  
Home phone (\_\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_  
Sport(s) you are interested in, or are already involved in with MCAC: ☐ Basketball ☐ Volleyball ☐ Cross Country  
Previous experience in this sport (years/seasons) \_\_\_\_\_ Shirt size: ☐YS ☐YM ☐YL ☐S ☐M ☐L ☐XL  
Father's name \_\_\_\_\_ Mother's name \_\_\_\_\_  
Work phone (\_\_\_\_\_) \_\_\_\_\_ Work phone (\_\_\_\_\_) \_\_\_\_\_  
Cell phone (\_\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_\_) \_\_\_\_\_  
Email \_\_\_\_\_ Email \_\_\_\_\_

Does your church have a gym available for use? ☐ Yes ☐ No

Church name, phone number and contact person \_\_\_\_\_

List any siblings currently involved with MCAC \_\_\_\_\_

We hereby give our consent for the above named student to represent the Mishawaka Christian Athletic Club in athletic activities for the year indicated. I/we have reviewed the Player Code of Conduct, Parent Code of Conduct, Medical Release Form and the MCAC Handbook. Our signatures below indicate that we are in agreement and compliance with the content of each of these items and will support the goals and rules of MCAC.

We realize this program exists to develop Godly character in our children and improving their athletic skills in their sport(s). With this in mind, we commit ourselves (parents and student) to participating in the activities and programs MCAC (see *Parent Participation Form in the MCAC Handbook*) for the full year and understand fees will not be refunded should we leave the program prior to the end of the year. We also give MCAC the right to use the player's picture in all forms of media and in all manners concerning the program for any lawful purposes provided such use is related to the player's participation in the program. Player names will only be used on website pages (roster, stats, awards, records) that are password restricted for MCAC participants only.

Since the *information in the MCAC Handbook is subject to change* as situations warrant, we understand that changes to the Handbook may supersede, revise, or eliminate one or more of the policies contained therein. We understand that these changes will be communicated to us through the website, notes given to the undersigned athlete or through e-mail. Our signatures mean that we agree to follow the MCAC Handbook and revisions to it. (A copy of the MCAC Handbook is available at the Mishawaka Christian Athletic Club website - [www.MCAC-Wildcats.com](http://www.MCAC-Wildcats.com).)

Father's signature \_\_\_\_\_ Date \_\_\_\_\_  
Mother's signature \_\_\_\_\_ Date \_\_\_\_\_  
Player's signature \_\_\_\_\_ Date \_\_\_\_\_

### Participation fee worksheet - (Refer to handbook for payment deadlines per sport.)

Team Level (fee per sport)	Participation Fee	Less optional sponsorships
Varsity (basketball \$470/volleyball \$295/CC \$160)	\$ _____ - \$ _____ = \$ _____	\$ _____
Jr. Varsity (basketball \$370/volleyball \$245/CC \$160)	\$ _____ - \$ _____ = \$ _____	\$ _____
Jr. High (basketball \$270/volleyball \$230/CC \$130)	\$ _____ - \$ _____ = \$ _____	\$ _____
Elementary (basketball \$215/volleyball \$195/CC \$95)	\$ _____ - \$ _____ = \$ _____	\$ _____
Total Participation fee (Make checks payable to MCAC)		\$ _____

#### MCAC use only

Birth Certificate	(rec'd/date) _____	Deposit paid	(rec'd/date) _____
Insurance form and fee	(rec'd/date) _____	Ck# _____	Amount _____
Medical release form	(rec'd/date) _____	Participation fee paid	(rec'd/date) _____
Physical	(rec'd/date) _____	Ck# _____	Amount _____
Player Code of Conduct	(rec'd/date) _____	Keep a copy for your records!	
Parent Code of Conduct	(rec'd/date) _____		
Parent volunteer form	(rec'd/date) _____		

# Mishawaka Christian Athletic Club

## Player Code of Conduct 20\_\_\_\_/20\_\_\_\_ Year

To enable the Mishawaka Christian Athletic Club to fulfill its mission of a Christian, competitive athletic program, each participant and parent must agree to abide by the following Player Code of Conduct.

### On and off the court

- Conduct yourself in a Christ-like manner; consistently strive to improve and strengthen your spiritual, physical and emotional health. Read the Bible on a regular basis; and pray for your teammates, parents and coaches regularly.
- Express a positive team-oriented attitude; learn from your mistakes; don't blame others for your own shortcomings.
- Be punctual and consistent in attendance at all required meetings, practices and games unless excused.
- Honor your teammates by submitting to the greater good of the team at the expense of your own ambitions.
- Honor your teammates; give them encouragement and develop an attitude that places others' needs before your own.
- Honor the Christian commitment of MCAC by your language (verbal, email, texting, etc.), not using unwholesome words; unfitting talk or jokes; avoid gossip or malicious talk about others. Remember your words may hurt someone, even if that wasn't your intent.

### On the court

- Always do your best and play for God, then your team - not yourself, this will benefit your team's performance.
- Honor and show respect to those in authority, including coaches and referees, by accepting at all times their decisions without argument, grumbling, or gesturing of any kind.
- Honor the decision of a referee or an official during a game. If you disagree, have your captain or coach approach the referee during a break so the dispute can be dealt with in the appropriate manner.
- Play fairly and follow the rules of your sport during all practices and competitions.
- Play hard but be courteous and respectful to your opponents in the true spirit of sportsmanship at all times. Treat all players as you would like to be treated. Acknowledge all good plays regardless of which team they represent.
- Be humble in winning and gracious in losing; your Christian character is **always** more important than winning.
- Honor our opponents; play your best yet don't engage in taunting, baiting, or ridiculing of any kind; refrain from outbursts of temper (verbal or otherwise); nor let your conduct be detrimental to yourself, teammates or MCAC.
- Attend all practices and games and notify your coach as soon as possible should extenuating circumstances occur. Understand that missing a game or practice without notice is a serious offense and will be grounds for discipline.
- Respect facilities and equipment at home, while traveling, or at a host site and try to leave it in as good or better shape than you found it (**picking up trash, putting things back where they belong, etc.**)

### Off the court

- Since we are unable to practice on a daily basis, it is imperative that players be committed to continual individual work to enhance their own skills and conditioning.
- Keep your body in top performance by exercising, eating a proper diet, getting appropriate sleep and not engaging in destructive behaviors such as smoking, drinking, abuse of drugs and other behaviors equally abusive.
- Recognize that any boy/girl relationship, whether yours or that of another, should remain personal and private, and details of this relationship should not be discussed with anyone while at Wildcats related events. This protects not only your privacy, but also that of your teammates who may have different dating values than yours.
- Refrain from personal displays of affection with your boyfriend/girlfriend while in uniform or at any Wildcats event. Although your private relationships are under the control of your parents, keep in mind that how you conduct yourself off the court has a great impact on how others perceive you and your MCAC teammates.
- Wear clothing that is modest and non-detracting while at MCAC -related events; don't wear any item of apparel with logos or words relating to alcohol, drugs, sexual references or violence.
- Maintain the required academic standards set by your parents.
- Meet financial and membership responsibilities in a timely manner (*No pay-No play*).

I have read and prayerfully considered the Player Code of Conduct and guidelines set forth in the Handbook with my parents and I agree to abide by both in order to honor God, myself, my parents, my teammates and MCAC. I understand that any violation of the Player Code of Conduct or the Handbook will be handled on a case-by-case basis and may result in disciplinary action up to and including dismissal from the program.

Player full name (please print) \_\_\_\_\_

Father's signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's signature \_\_\_\_\_ Date \_\_\_\_\_

Player's signature \_\_\_\_\_ Date \_\_\_\_\_

## MCAC Medical Release and Authorization 20\_\_\_\_/20\_\_\_\_ Year

Please submit-one player per form

Player's full name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ ☐ M ☐ F

Parent's name(s) \_\_\_\_\_

Address \_\_\_\_\_  
street city state zip

Home phone (\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Work phone (\_\_\_\_) \_\_\_\_\_ Other phone (\_\_\_\_) \_\_\_\_\_

Medications taken and known allergies: \_\_\_\_\_

Any other pertinent medical history: \_\_\_\_\_

Doctor Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_  
street city state zip

Insurance Information Provider \_\_\_\_\_ Policy # \_\_\_\_\_

Emergency contact (other than parent) \_\_\_\_\_ Home phone (\_\_\_\_) \_\_\_\_\_

Relationship to player \_\_\_\_\_ Cell phone: (\_\_\_\_) \_\_\_\_\_

*In consideration of our student's participation with Mishawaka Christian Athletic Club (MCAC) for the year noted above:*

We, the parents of the above named child, do hereby release, absolve and hold harmless the directors, coaches and leaders of MCAC, Inc. from any and all responsibility and liability for all losses, damages or injuries occurring as a result of our child's participation in the activities of MCAC, Inc., including any from their own negligence, for any injury or claim resulting from such athletic participation, and including travel to and from tournaments/games within the area or to other cities as required, and agrees to take no legal action against MCAC or the schools/programs involved because of any accident or mishap involving the student's athletic participation. We further agree that any claim or dispute arising from or related to this agreement shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the *Rules of Procedure for Christian Conciliation* of the Institute for Christian Conciliation ([www.Peacemakerministries.org](http://www.Peacemakerministries.org)). These methods shall be the sole remedy for any controversy or claim arising out of the agreement and expressly waive their right to file a lawsuit in any civil court against one another for such disputes, except to enforce an arbitration decision.

We understand that reasonable precautions will be taken to make the program safe and beneficial for all children, but that risk of injury cannot be eliminated entirely, and that this release is necessary for our child to participate in the MCAC program. We also understand that athletic competition is strenuous by nature and acknowledge MCAC's strong recommendation that our student obtain a complete physical examination before participating. We also know of and acknowledge that the student knows of the risks involved in athletic participation, understands that serious injury, and even death, is possible in such participation and chooses to accept any and all responsibility for the student's safety and welfare while participating in athletics. We further agree to make, by assignment of third-party benefits or otherwise, full and complete payment for examination, treatment or hospital care required in the case of a medical emergency.

Furthermore, we hereby authorize, in the event our child suffers injury, any director, coach or leader of MCAC to consent to emergency medical treatment for our child when we cannot be contacted to so consent. Such medical treatment may include, without limitation, x-ray examination, anesthetic, medical, surgical examination or treatment and general hospital care. No prior determination of life-threatening emergency or danger of serious or permanent injury. resulting from delay of treatment need be made under this authorization. This authorization is given in advance of any specific diagnosis, treatment, or hospital care being required, and is given to provide authority and power on the part of a director or coach of MCAC to give specific consent to any and all such examination, treatment, or hospital care. We specifically give our consent for basic first aid treatment to be administered as necessary (e.g. bandages, antibiotic ointment, hydrogen peroxide, over-the-counter pain reliever, etc.).

We hereby verify that we understand and accept the terms of this Medical Release and Authorization.

Signature of parent/legal guardian \_\_\_\_\_ Date \_\_\_\_\_

# MCAC Pre-Participation Medical History 20\_\_\_\_/20\_\_\_\_ Year

A medical history completed by a parent is required at least every two years.

A physical examination by a physician is highly recommended but not required.

Date \_\_\_\_\_

Player's full name \_\_\_\_\_ ☐ Male ☐ Female

Address \_\_\_\_\_ City/St/Zip \_\_\_\_\_ Date of birth \_\_\_\_\_

Player's email address \_\_\_\_\_ Age (as of Sept. 1) \_\_\_\_\_ Grade \_\_\_\_\_

Home phone (\_\_\_\_\_) \_\_\_\_\_ Cell phone (\_\_\_\_\_) \_\_\_\_\_

Personal Physician \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Explain "Yes" answers below:

1. Have you ever been hospitalized? ..... ☐ Yes ☐ No  
Have you ever had surgery? ..... ☐ Yes ☐ No  
Are you presently under a doctor's care? ..... ☐ Yes ☐ No
2. Are you presently taking any medications or pills? ..... ☐ Yes ☐ No
3. Do you have any allergies (medicine, bees or other stinging insects)? ..... ☐ Yes ☐ No.
4. Have you ever passed out during or after exercise? ..... ☐ Yes ☐ No.  
Have you ever been dizzy during or after exercise? ..... ☐ Yes ☐ No  
Have you ever had chest pain during or after exercise? ..... ☐ Yes ☐ No  
Have you ever had high blood pressure? ..... ☐ Yes ☐ No  
Have you ever been told that you have a heart murmur? ..... ☐ Yes ☐ No  
Have you ever had racing of your heart or skipped heartbeats? ..... ☐ Yes ☐ No  
Has anyone in your family died of heart problems or a sudden death before age 50? ..... ☐ Yes ☐ No  
Has anyone in your family had Marfan's syndrome? ..... ☐ Yes ☐ No
5. Do you have any skin problems (itching, rashes, acne)? ..... ☐ Yes ☐ No
6. Have you ever had a head injury? ..... ☐ Yes ☐ No  
Have you ever been knocked out or unconscious? ..... ☐ Yes ☐ No  
Have you ever had a seizure or epilepsy? ..... ☐ Yes ☐ No  
Have you ever had a stinger, burner or pinched nerve? ..... ☐ Yes ☐ No
7. Have you ever had heat cramps, heat illness or muscle cramps? ..... ☐ Yes ☐ No
8. Do you have trouble breathing or do you cough during or after activity? ..... ☐ Yes ☐ No
9. Do you use any special equipment (pads, braces, neck rolls, eye guards, etc.)? ..... ☐ Yes ☐ No
10. Have you had any problems with your eyes or vision? ..... ☐ Yes ☐ No  
Do you wear glasses or contacts or protective? Eye wear? ..... ☐ Yes ☐ No
11. Are you missing an eye, kidney or testicle? ..... ☐ Yes ☐ No
12. Have you ever sprained/strained, dislocated, fractured, broken or repeated swelling of any bones or joints? ☐ Yes ☐ No  
☐ Head ☐ Shoulder ☐ Thigh ☐ Neck ☐ Elbow ☐ Knee ☐ Foot  
☐ Forearm ☐ Shin/Calf ☐ Back ☐ Wrist ☐ Ankle ☐ Hip ☐ Hand
13. Have you had any other medical problems (infectious mononucleosis, diabetes, anemia, etc.)? ☐ Yes ☐ No
14. Have you had a medical problem or injury since your last evaluation? ..... ☐ Yes ☐ No
15. When was your last tetanus shot? \_\_\_\_\_
16. When was your first menstrual period? \_\_\_\_\_  
When was your last menstrual period? \_\_\_\_\_  
What was the longest time between your periods last year? \_\_\_\_\_

Explain "Yes" answers \_\_\_\_\_

I hereby state that, to the best of my knowledge, my answers to the above questions are correct. (Both signatures are required.)

Player signature \_\_\_\_\_ Date \_\_\_\_\_

Parent or guardian signature \_\_\_\_\_ Date \_\_\_\_\_

# MCAC Pre-Participation Physical Examination 20\_\_\_\_/20\_\_\_\_ Year

*A physical examination is highly recommended but not required.  
To be completed by physician or similar form provided by a physician*

Date \_\_\_\_\_  
Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Height \_\_\_\_\_ Weight \_\_\_\_\_ BP \_\_\_\_\_/\_\_\_\_ Pulse \_\_\_\_\_  
Vision: R 20/\_\_\_\_ L 20/\_\_\_\_ Corrected Y N Pupils (Circle) Equal/Unequal R > L L > R

	<u>Circle if option given</u>	<u>Specific Findings</u>
Marfan's syndrome stigmata	No Yes	_____
<b>Heart</b>	Normal	_____
Rhythm	Regular Irregular	_____
Murmur (supine)	No Yes	_____
Murmur (standing)	No Yes	_____
Lungs		_____
Skin		_____
Abdominal		_____
Femoral Pulses		_____
Genitalia/Hernia		_____
<b>Musculoskeletal:</b>		_____
Neck		_____
Shoulders		_____
Elbows		_____
Wrists		_____
Hands		_____
Back		_____
Knees		_____
Ankles		_____
Feet		_____
Other		_____

## Clearance (circle one):

- A. Cleared  
B. Cleared after completing evaluation/rehabilitation for \_\_\_\_\_  
C. Not cleared. due to \_\_\_\_\_  
Recommendation \_\_\_\_\_

I hereby certify that this athlete was examined by me. At this time, no physical condition was detected which would reasonably be anticipated to render this athlete physically unfit to engage in any sport, **except those circled below:**

**Boys Sports:** Baseball, Basketball, Cross Country, Football, Golf, Soccer, Swimming, Tennis, Track, Wrestling

**Girls Sports:** Basketball, Cross Country, Golf, Gymnastics, Soccer, Softball, Swimming, Tennis, Track, Volleyball

Name of physician \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Signature of physician \_\_\_\_\_

*(Based on INSAA forms and recommendations developed by the American Academy of Family Physicians, American Academy of Pediatrics, American Medical Society for Sports Medicine, American Orthopedic Society for Sports Medicine and American Osteopathic Academy of Sports Medicine).*