



St. Francis Xavier Athletics

*Sports do not build character.
They reveal it
-John Wooden*

2018-2019

Important Dates for 2018/2019 SFX Athletics!

- All 5th-8th grade students interested in joining any sports teams will turn in all paperwork on the first day of school.
- **August 20th, first practice for fall sports.**
- **September 10th** -Fall season games start this week!

We Value Your Feedback!

The long term success of SFX Athletics hinges greatly on the commitment and support of our school parents. Please feel free to contact us with any questions you have.

Ben.stryczek@sfxphx.org

Welcome to the 2018 - 2019 school year. St. Francis Xavier participates in the CYAA for boys and girls in 5th-8th grades. Head Athletic Director Ben Stryczek will be in charge of all boys and girls sports programs with assistance from Coach Mitchell and Coach Chavarria.

Once again...ALL incoming 5th-8th grade students are **required** to have an updated physical on file. If you are participating in sports all forms and physicals **MUST** be turned in on the first day of school. Students will not be allowed to participate unless all forms are submitted. **Please note: Sports Physicals Due August 10th.**

Forms include:

- Sports Permission/Emergency Form
- Student Health History
- Physical Exam
- Role of the Parent
- Transportation form

Sports fees will be posted to your FACTS account once the season starts. The sports fee is \$125 per sport now including customized jerseys to keep.

Fall Sports: BOYS FLAG FOOTBALL/GIRLS VOLLEYBALL

- The season runs from early Sept through early Nov.
- The CYAA tournament for 7th & 8th graders is Oct. 21st-Oct. 31st.

Winter Sports: BOYS BASKETBALL/GIRLS SOFTBALL

- The season run Nov 19th through early Feb.
- The CYAA tournament for 7th & 8th graders is Jan. 21st -Feb. 1st.

Boys and Girls Cross Country Invitational

- Cross Country Week of Nov. 4th.
- Practices will start October 22nd.

Boys and Girls Soccer

- Must sign up by December 20th
- Practices start January 8th
- CYAA Tournament is February 11th.

Spring Sports: BOYS BASEBALL/GIRLS BASKETBALL

- The season runs from mid February 18th through April 30th
- The CYAA tournament for 7th & 8th graders begins April 30th



C.Y.A.A. Sports Permission and Emergency Form

Saint Francis Xavier SPORT: _____

I/We, the parent(s)/guardian(s) of _____ request that SFX allow my child to participate in the C.Y.A.A. after school sports program.

We hereby release and save harmless SFX or any and all its employees from any and all liability for any harm arising to my/our son/daughter as a result of participating in the C.Y.A.A. after school sports.

Be it known that, I, the undersigned parent or guardian of the student above-named, do hereby give and grant unto any medical doctor or hospital my consent and authorization to render such aid, treatment, or care to said student, as in the judgment of said doctor or hospital, may be required on an emergency basis, in the event said student should be injured or stricken ill while participating in an interscholastic activity.

DATED the _____ day of _____, 20____.

_____ (Parent/Guardian Signature)

_____ (Parent/Guardian Signature)

In case of emergency, please contact: Name _____
Address _____
Phone _____
Cellular Phone _____

Home Address _____

Home Phone _____

Mother's Work Phone _____ Cellular Phone _____

Father's Work Phone _____ Cellular Phone _____

Family Physician _____ Phone _____

*In case of an accident, may we choose a physician? YES _____ NO _____

Hospital Preference _____

Insurance Company _____ Policy/Group # _____

All students must have a valid doctor's physical (good for one year) on file with the school or attached to this form on the first day of practice.

_____ Physical is on file with the school (have participated in sports previously this school year)

_____ Physical is attached to this form

STUDENT HEALTH HISTORY

(To be completed and signed by parent/legal guardian)*

Student's Name _____ Current Sports Participation _____
 Address _____ 1) _____
 Phone _____ (2) _____
 Name of Family Physician _____ (3) _____

*Per AIA Bylaws; Article 15. Student Eligibility Rules, Section 15.7, Paragraph 15.7.3, Subparagraph 15.7.3.1

Has your child ever had or now has.....?

Details	Yes	No	Year	Details	Yes	No	Year
Allergy	Yes	No	_____	Joint Pain	Yes	No	_____
Anemia	Yes	No	_____	Kidney Trouble	Yes	No	_____
Ankle Injury	Yes	No	_____	Knee Injury/Surgery	Yes	No	_____
Arthritis	Yes	No	_____	Knocked Out	Yes	No	_____
Asthma	Yes	No	_____	Loss of Consciousness	Yes	No	_____
Back Pain	Yes	No	_____	Menstrual Cramps	Yes	No	_____
Concussion	Yes	No	_____	Migraine Headaches	Yes	No	_____
Diabetes	Yes	No	_____	Mononucleosis	Yes	No	_____
Eczema (skin problem)	Yes	No	_____	Neck Injury	Yes	No	_____
Elbow Injury	Yes	No	_____	Rheumatic Fever	Yes	No	_____
Emotional Problems	Yes	No	_____	Scoliosis	Yes	No	_____
Epilepsy (seizures)	Yes	No	_____	Spine Injury	Yes	No	_____
Fainting	Yes	No	_____	Sinus Trouble	Yes	No	_____
Hearing Trouble	Yes	No	_____	Sore Throats (chronic)	Yes	No	_____
Heart Murmur	Yes	No	_____	Tuberculosis	Yes	No	_____
Hepatitis	Yes	No	_____	Valley Fever	Yes	No	_____
Hernia (rupture)	Yes	No	_____	Wrist Injury	Yes	No	_____
Hives	Yes	No	_____	Other	Yes	No	_____

Operations _____
 Nature Year Nature Year
 _____ _____ _____ _____
 Nature Year Nature Year
 _____ _____ _____ _____

Fractures _____

Sprains/Dislocations _____

Does the student have to stop while running 1/2 mile? _____

If student had prolonged absences from school, state why and when: _____

To which medicines is student allergic? _____

If now under doctor's treatment, why and doctor's name: _____

MEDICATION NOW TAKING: _____

Sports from which student is to be excluded: _____

DATES OF LAST: Tetanus Booster _____ Chest X-ray _____

If emergency service involving medical action or treatment is required and neither the parents nor guardians can be contacted, I hereby consent for the student named above to be given medical care by the doctor selected by the school.

Signature of Parent / Legal Guardian _____

ROLE of Parents

Parents of children participating in the CYAA Athletic Program should be made aware of the philosophy and guidelines as presented in the CYAA Handbook (See Diocese of Phoenix, Catholic Schools Website)

Parents should be encouraged to take an active part in the CYAA Athletic Program of their school:

- Parents can have a great influence as spectators at a game. It is of importance that this influence be of a positive nature. Coaches and players are encouraged and motivated by the support of parents, and the greatest support and encouragement is needed after a loss.
- When relating to coaches and officials, parents should always be an example of cooperation and respect.
- A parent who observes a coach whose behavior is not consistent with CYAA guidelines/philosophy should make it known to the school's athletic director in writing, and should not approach the coach in person.
- Parents are to refrain from offensive language and actions. Taunting or swearing will not be tolerated.
- Parents will respect the judgment of an official or umpire.
- Parents will monitor and follow the guidelines in the school's handbook regarding academic progress and ineligibility. Students must maintain a grade of C or above in all classes, reports will be run quarterly and mid-quarterly.
- Please read the following page regarding school procedures for safety of our athletes and facilities.

Keep the above and detach the bottom. Return to Athletic Director by _____

RETURN THIS PORTION TO PE COACHES/ATHLETIC DIRECTORS

Athlete's Name _____ Grade/Team _____

Parent's Name _____

Parent's Signature _____ Date _____



Roman Catholic Diocese of Phoenix
TRANSPORTATION OF MINOR PERSON TO/FROM SCHOOL CAMPUS

The Catholic Diocese of Phoenix "Diocesan Policy and Procedure for the Protection of Minors" as it pertains to Diocesan Personnel provides, in part, that "Field trips or other outings involving a minor in places and situations where no other responsible adults are present..." are to be avoided.

Because of the limited number of participants in the _____ (name of program) of _____ (name of school) and the time of day in which program events will occur, it may not always be possible to have two adults occupying each vehicle transporting minors to and from the programs.

The Diocese permits exceptions to this policy only upon a showing by the school that:

- 1) a school has made reasonable efforts to have two adults present in such vehicles, but without success; and 2) a parent or guardian of any student participating in such program has consented in writing to allow such student to be transported in a vehicle occupied by only one adult.

I, _____ of _____ (name of parent/guardian) (name of minor student)

have selected one of three alternatives below by checking the applicable box to indicate selection:

(1) CONSENT OF PARENT/GUARDIAN TO ALLOW FOR EXCEPTION TO POLICY.

I, _____, parent/guardian of _____, (name of student) a participant in the _____ (name of program) of _____ (name of school) hereby consent to allow the student named above to travel to and from program events in a vehicle occupied by a single adult person at any time during the _____ school year.

(2) NON-EXCEPTION

I, _____, parent/guardian of _____, choose to have my child always travel in a 2 adult vehicle.

(3) ASSUMPTION OF TRANSPORTATION RESPONSIBILITY

I, _____, parent/guardian of _____, will solely provide transportation for my child to all activities away from the school campus.

(signature of parent/guardian)

(print name of parent/guardian)

State of Arizona
County of _____

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public

My commission expires: _____