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THE PRIDE OF MAGNOLIA HIGH  
SCHOOL MAGNOLIA HIGH SCHOOL  
MARCHING BAND

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## **A Vision into the Future**

Magnolia High School  
Music Department  
601 Maple Avenue  
New Martinsville, WV 26155

Greetings from the Pride of Magnolia High School!

We would like to take this opportunity to thank you for viewing this packet of information about our band program. Included you will find information about our band program, band camp forms, and the opportunities available to the students of Magnolia High School.

The administration as well as the board of education has been incredibly supportive of our music program at Magnolia. For a program to continue to succeed, it cannot stay still. This is a vision we have for our program, which will impact hundreds of students in the future as it has already impacted hundreds.

We understand that developing a program of this magnitude takes time and patience. However, it is our goal to develop a program that will continually compete at a state and national level for many years to come. It is our hope that we can achieve each of these tasks within a certain time frame in order to help the students of today prepare to be the leaders of tomorrow.

We thank you again for your time and please if you have any question do not hesitate to contact me.

Sincerely,

Mr. Jacob Hoskins

Music Director  
Magnolia High School  
Email: Jacob [hoskins@k12.wv.us](mailto:hoskins@k12.wv.us)  
Phone: 304-455-1990 Ext 514

## MAGNOLIA HIGH SCHOOL MUSIC DEPARTMENT

This information packet contains a great deal of very important information for students and parents in regard to participation in band at Magnolia High School. All items in this packet should be read carefully and signed where appropriate. Some of the policies and procedures contained here have been in effect for some time, while others are new or changes of existing policies or procedures. Parents and students should become familiar with each of the policies and procedures as they will be faithfully adhered to.

No student will be permitted to participate in try-outs, practices or events until such time as they have all required materials turned in to the Music Department. This policy will protect all those involved.

The following materials are required for participation in band at Magnolia High School:

- Completed physical examination (WVSSAC Requirement)
- Completed permission forms for participation, travel, and emergency medical care
- Emergency notification form
- Satisfaction of all eligibility requirements of the West Virginia Secondary Schools Activities Commission (WVSSAC)
- Birth certificate on file
- Insurance Acknowledgement Form
- Over the Counter Medication Form

### PHYSICALS

Completed physical examinations are required of all participants. It is the responsibility of the parent or guardian to bear the expense of a physical. The physical examination form should be completed to the greatest extent possible prior to the physical examination by a physician.

### INSURANCE

All participants are required to verify basic health insurance coverage of some type. Verification must include the company or agency providing such coverage. School insurance is supplemental to students' coverage. The student accident insurance coverage is valid for all sports except varsity football. If you elect to use the student accident insurance as your primary coverage, you must secure the necessary forms from the local agent and pay the premium prior to the starting date for any type of participation.

**\*\*\*\*There are 13 signature spaces in the packet to be signed by parent/student\*\*\*\***  
**\*\*\*\* 10 Forms and 1 physical form to be turned in on the first day of Pre-Camp\*\*\*\***

## **ELIGIBILITY**

The WVSSAC rules concerning interscholastic athletic eligibility appear on the physical examination form. The requirement for a 2.00 grade point average the previous semester will be used without exception. It is, however, possible to become eligible after a nine-week improvement period. This does not pertain to the band. There is no GPA Requirement, however grades are important and will be monitored.

## **EMERGENCY MEDICAL TREATMENT**

The school must have authorization for emergency medical treatment of an ill or injured participant. Parents will be notified, if possible, prior to use of the authorization.

## **TRAVEL AUTHORIZATION**

All participants, including managers, statisticians, and any other non-school personnel must have a travel authorization on file. Participants are not permitted to return from an event with anyone except their parents and then only after the parents have provided a signed statement. Participants are not permitted to ride with friends, neighbors, and so forth, when returning from a contest. Employees of the Wetzel County Board of Education are authorized to transport any participants prior to or following an event.

## **BIRTH CERTIFICATES**

All participants must have a copy of their birth certificate on file in the school office prior to participation. This copy will be required only the first time a student participates in interscholastic athletics.

## **CATASTROPHIC INJURY INSURANCE**

The WVSSAC provides, at no charge, a catastrophic injury insurance policy for all interscholastic athletic participants. Copies of the policy are available in the school office.

## **QUESTIONS**

If, at any time, you have questions or concerns regarding the music program at Magnolia High School, please contact the Director of Music, the Assistant Principal or the Principal at your convenience. We will make every attempt to answer your questions or discuss your concern. We want the music participants at Magnolia High School to enjoy their experiences and to be treated fairly in all regards.

## Easy Ways to Keep Informed

- **Our Facebook Pages**
  - New Martinsville Band Patrons
  - Magnolia HS Music Department Group
- **Instagram**
  - Mhs\_music\_dept
- **Our YouTube Channel**
  - Magnolia High School Music Department
- **Twitter**
  - MagnoliaHSMusic
- **Website**
  - Magnolia High School Website
    - Under Fine arts
      - [www.wetzelcountyschools/mhs](http://www.wetzelcountyschools/mhs)
- **Email/ Phone**
  - Jacob.hoskins@k12.wv.us
  - 304-455-1990 Ext. 514
- **Texting/ Emailing groups**
  - **For Parents Only**
    - Text This phone number
      - 81010
    - @he62hkf
  - **For Band Students Only**
    - Text this phone number
      - 81010
    - @202324band

## **2023-2024 Marching Band**

It is important to have the warmups, pregame music, and show music memorized as quickly as possible. For those of you who may have difficulty memorizing music, please do not worry. We have found that memorization takes care of itself as you become more familiar with playing the music in a group setting over several repetitions.

## **Woodwind and Brass Players**

At MHS, students are expected to use their own instruments, excluding instruments such as the tuba, bass clarinet, bass trombone, and percussion. We have limited school instruments, and they are signed out on a first come first serve basis. If a student uses a school owned instrument, they must sign a contract indicating that they will return their instrument, properly take care of it, and return it in the condition it was left in. I understand that accidents happen and there will be some wear in tear on the instrument. These are things that will be considered at the end of the year. If a student is using their own instrument, they are responsible for maintenance and repairs. We can use our repair person for your instruments, but you will have to pay the bill for the repairs. Instrument storage cubbies are located in the school for each student to use. Students are also permitted to check out a school owned instrument for the summer. See check out agreement (attached).

## **Apparel**

The marching band has shirts that we wear under our uniforms. If you are in the guard, you will wear a different uniform and jacket See Band Expense Form. (Attached) Also for games and competitions we want to wear relaxing pants, not jeans if you can help it. Jeans stretch the uniform fabric and can cause damage.

## **Additional Needs**

At camp, school practices, and other rehearsals, students will need comfortable clothes as well as shoes to march in. Multiple pairs of shoes and socks are recommended. Even though you cannot march in flip flops, you may bring them for sectionals. Please no boots as they are tough to march in.

### **What to bring to band (Pre-Camp)**

- Completed Packet (Must have 1<sup>st</sup> day)
  - 10 Forms
  - Physical (required by the state)
- Water Bottle- Will provide one but can bring your own.
- Sunscreen (Very Important)
- Comfortable clothes and tennis shoes- No Sandals, Crocs, or Boots please
- Instrument
- Music

### **What to bring to band camp (at 4H Grounds)**

- Bed necessities (sheet, pillow, blanket)
- Toiletries
- Sunscreen
- Bug Spray
- Water Bottle- If you don't use schools
- Rain Gear and cold gear
- Hat
- Sunglasses
- Comfortable clothes and tennis shoes (plenty of socks!)
  - Two pairs of tennis shoes if possible as they will get wet
- Instrument
- Music



# Magnolia News Letter

The Magnolia Band Parent Patrons are a wonderful group of individuals who volunteer their time and talents for the benefit of our students. Parents not only make a difference in the students' lives, but they are a necessary part of the band program's foundation. Simply put, volunteering is one of the greatest things we can do for our community.

The involvement of parent volunteers is absolutely essential for the success of our outstanding band program and our students. It is the one opportunity, at the high school level, where parents can be directly involved with their student(s). With the many events- football games, marching festivals, concerts, etc. --- on our calendars, it takes the time and energy of a small I army to support our kids!

Even if you haven't been involved in the past, it's never too late to start. The more volunteers the better. If you feel like there are already too many people volunteering, volunteer anyway. There are never enough volunteers and we could always use the extra hands. Because of their busy performance schedule, we are always looking for parents and families to help, whether it be as a Band Aid for a parade or a chaperone on a bus trip. It is an easy (and fun) way to get involved in the education of your student

All of the information and activities may seem a bit overwhelming, but we promise there is an opportunity somewhere in our program for your expertise. Please see below for an explanation of specific areas where the band can use your help. Remember, you can get involved at any level. There is nothing that says if you volunteer to help, that you are now committed to be at every practice and/or event. The more people volunteer, the easier it is to spread the load around. If something here sparks your interest or you think there is something else you can offer, just let us know! You can contact Anna O'Neil President (304) 771-5124

To have a strong band parent team, it just takes each family getting involved in one committee or activity, and it is easy to do!

The Band Parents meets on a monthly basis (2nd Tuesday) in the Magnolia Band room at 6:00 pm

I cannot wait to see you there!

Jacob Hoskins

Music Director

Magnolia High School

Email: Jacob [hoskins@k12.wv.us](mailto:hoskins@k12.wv.us)

Phone: 304-455-1990 Ext 514

# Summer Camps Schedule

## Pre-Camp July 17<sup>th</sup>-21<sup>st</sup>

- Monday
  - 8 a.m.- Meet and Greet in band room
  - 9 a.m.- Marching Basics
  - 12 p.m.- Lunch
  - 1 p.m.- Full Band Rehearsal and Equipment/ Music Dispersal
  - 3 p.m. End of Rehearsal
- Tuesday
  - 8 a.m.- Basics
  - 12 p.m.- Lunch
  - 1 p.m.- Woodwind and Percussion
  - 3 p.m.- End of Rehearsal
- Wednesday
  - 8 a.m.- Basics/ Drill
  - 12 p.m.- Lunch
  - 1 p.m.- Brass and Percussion
  - 3 p.m.- End of Rehearsal
- Thursday
  - 8 a.m.- Basics / drill
  - 12 p.m.- Lunch
  - 1 p.m.- Woodwind, Brass, and Percussion Sectionals (Full Band)
  - 3 p.m.- End of Rehearsal
- Friday
  - 8 a.m.- Basics/ Drill
  - 12 p.m.- Lunch
  - 1 p.m.- Full Band
  - 3 p.m.- End of Rehearsal

## **Band Camp Tentative**

### **Schedule July 23<sup>rd</sup> – 28<sup>th</sup>**

- **Sunday**

- 2 p.m.- Arrive at fairgrounds
- 2:30 p.m.- Basic block
- 3:30 p.m.- Set First show
- 6 p.m.- Dinner
- 8 p.m.- Full band rehearsal (music inside)
- 10 p.m. Done
- 11 p.m. Lights out

- **Monday**

- 6:30 a.m.- Parade Practice and exercises
- 7:00 a.m. - Breakfast
- 8:30- basic Block
- 9:30 a.m.- First show
- 12 p.m.- Lunch
- 3 p.m.- Sectionals
- 6 p.m.- Dinner
- 8 p.m.- First show
- 9 p.m.- Full Band
- 10 p.m.- bed
- 11 p.m.- lights out

- **Tuesday**

- 6:30 a.m.- Parade practice and exercises
- 7 a.m.- Breakfast
- 8:30- basic Block
- 9:30 a.m.-Second show
- 12 p.m.- Lunch
- 3 p.m.- Sectionals

- 6 p.m.- Dinner
- 8 p.m.- First show
- 9 p.m.- Full Band
- 10 p.m.- Bed
- 11 p.m.- Lights out

- **Wednesday**

- 6:30 a.m. Parade practice and exercises
- 7 a.m.- Breakfast
- 8:30- Basic Block
- 9:30 a.m.- First second show
- 12 p.m.- Lunch
- 3 p.m.- Sectionals
- 6 p.m.- Dinner
- 8 p.m.- Full Band
- 9:30 p.m.- Games
- 11 p.m.- Lights out

- **Thursday**

- 6:30 a.m.- Parade practice and exercises
- 7 a.m.- Breakfast
- 8:30- Basic Block
- 9:30 a.m.- First show
- 12 p.m.- Lunch
- 3 p.m.- Sectionals
- 6 p.m.- Dinner/ Camp Fire

- **Friday**

- 8:00 am- Breakfast
- 9:00 am- Clean up
- 12:00- Lunch
- 1:00 pm- Practice
- 2:00 pm- Parent performance

| 2023-24 MHS Band Football Schedule |                    |            |              |         |
|------------------------------------|--------------------|------------|--------------|---------|
| *Times and Dates May Change*       |                    |            |              |         |
| Date                               | Team               | Home/ Away | Meeting Time | Special |
| September 1, 2023                  | Writ Count         | Away       | 4:00 PM      |         |
| September 8, 2023                  | River              | Home       | 5:30 PM      |         |
| September 15, 2023                 | Cameron            | Home       | 5:30 PM      |         |
| September 22, 2023                 | Monroe Central     | Home       | 5:00 PM      |         |
| September 29, 2023                 | Tyler Consolidated | Home       | 5:00 PM      |         |
| October 6, 2023                    | Frontier           | Away       | 5:00 PM      |         |
| October 13, 2023                   | St. Mary's         | Away       | 5:00 PM      |         |
| October 20, 2023                   | Ravenswood         | Home       | 5:00 PM      |         |
| October 27, 2023                   | Valley             | Away       | 5:00 PM      |         |
| November 3, 2023                   | Clay Battelle      | Away       | 4:30 PM      |         |
|                                    |                    |            |              |         |

| 2023-24 MHS Band Competition Schedule |                    |                         |              |  |
|---------------------------------------|--------------------|-------------------------|--------------|--|
| Event                                 | Date               | Location                | Meeting Time |  |
| Tyler Consolidated                    | September 16, 2023 | Tyler Consolidated      | TBA          |  |
| Hurricane Band Competition            | September 23, 2023 | Hurricane HS            | TBA          |  |
| Parkersburg HS or Park South HS       | September 30, 2023 | Parkersburg HS or South | TBA          |  |
| Ripley Viking Fest                    | October 7, 2023    | Ripley HS               | TBA          |  |
| Marshall University Band Competition  | TBA                | Marshall University     | TBA          |  |
|                                       |                    |                         |              |  |
|                                       |                    |                         |              |  |

| 2023-24 MHS Band Schedule      |                       |                         |                   |           |
|--------------------------------|-----------------------|-------------------------|-------------------|-----------|
| *Times and Dates May Change*   |                       |                         |                   |           |
| Event                          | Date                  | Location                | Meeting Time      |           |
| Non Mandatory Sectionals       | July 10-14            | Magnolia                | 8:00 am- 12:00 pm | *         |
| Pre-Camp                       | July 17-21            | Magnolia HS             | 8:00 am- 3:00 pm  |           |
| Band Camp                      | July 23- 28           | 4-H Grounds             |                   | Away Camp |
| Pictures                       | July 31, 2023         | Magnolia HS             | 10:00 AM          |           |
| First Day of School            | August 21, 2023       |                         |                   |           |
| Meet the Team                  | TBA                   | Magnolia HS             | TBA               |           |
| Full Week Practices            | August 1-11           | Magnolia HS             | 8 am-12 pm        | Mon-Fri   |
| Woodwind/ Percussion Car wash  | 5-Aug-23              | Mayo Exxon              | 10:00- 2:00 pm    | *         |
| Three a Week Practice (M,T,Th) | August 14- November 2 | Magnolia HS             | 3:30- 5:00 pm     |           |
| Brass/ Field Com. Car Wash     | August 12, 2023       | Mayo Exxon              | 10:00- 2:00 pm    | *         |
| Full Band Car Wash             | August 19, 2023       | Mayo Exxon              | 10:00- 2:00 pm    |           |
| Labor Day Parade               | September 4, 2023     | Paden City REM Building | 11:45 AM          |           |
| Farmers Market Performance     | September 14, 2023    | Bruce Park              | 5:00 PM           |           |
| Veteran Day Program            | TBA                   | Magnolia HS             | TBA               |           |
| All State Auditions            | Nov. 30, Dec. 1-2     | Charleston              | TBA               | *         |
| Christmas Parade               | December 2, 2023      | Magnolia HS             | TBA               |           |
| Winter Concert                 | December 8, 2023      | Magnolia HS             | 5:00 PM           |           |
| Santa's Workshop               | December 15-16th      | Magnolia HS             | TBA               |           |
| Marshall University Honor Band | February 21-23        | Marshall University     | TBA               | *         |
| Jazz Band Rating Festival      | February 24, 2024     | University High School  | TBA               | *         |
| Solo and Ensemble              | January 20, 2024      | John Marshall           | TBA               | *         |
| All County Band                | TBA                   | TBA                     | TBA               | *         |
| Band Ratings Festival          | April 17-18, 2024     | John Marshall           | TBA               |           |
| Spring Concert                 | April 19, 2024        | Magnolia HS             | 5:00 PM           |           |
|                                |                       |                         |                   |           |
|                                |                       |                         |                   |           |
|                                |                       |                         |                   |           |

\* For Selected Students

## 2023-2024 Magnolia Band Season Order Form

Mail Payments to: New Martinsville Band Patrons (NMBP)  
c/o: Mr. Hoskins  
601 Maple Ave.  
New Martinsville, WV 26155

Checks Payable To: NMBP

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Instrument: \_\_\_\_\_

| Item   | Cost                          | Total |
|--|-------------------------------|-------|
| Uniform Rental   | \$30                          | \$30  |
| Student T-Shirts (1 Required, 2 recommended)           | \$15 (2XL and up add. \$2.00) |       |
|  |                               |       |
| Band Marching Shoes (Required if not purchased before) | \$46                          |       |
| Optional   |                               |       |
| Parent T-Shirt if purchase                             | \$15 (2XL and up add. \$2.00) |       |
|  |                               |       |
|  | Grand Total:                  |       |

\*\*\*\*All T-shirt orders including parent please fill out form on next page for size\*\*\*\*

You may pay the amount in full, make payments monthly, or fundraise to pay.

**Commitment to Pay Contract:** It is very important to pay your bill. We want to continue to offer our students the best! We have a large organization and a liquid account. If money is still owed when the student graduates or quits band, it is still owed. Students who quit may still participate in fundraisers to pay off their accounts. If the account is not paid by graduation, the student's diploma will be held until the account is paid. All yearly payments are due by the end of the current school year. If you cannot pay, please contact Jacob Hoskins to discussion options. Money should never be the issue for a student not participating in band.

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

\_\_\_\_\_  
Date



## 2023-2024 T-Shirt and Shoe Order Form for Students

Student Name: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ Quantity: \_\_\_\_\_

Name/Instrument/Section: \_\_\_\_\_

\*Example: John Smith/Trombone/Brass (You may use a nickname in place of your name)

Shoe Size (If Ordering Shoes): \_\_\_\_\_

### T-Shirt Order Form for Parents

**\*If Purchasing your own shirt\***

Student's Name: \_\_\_\_\_

Size: \_\_\_\_\_

Size: \_\_\_\_\_

Size: \_\_\_\_\_

Size: \_\_\_\_\_





## The 2023-2024 Magnolia High School Music Department Student Consent and Release Form

(Please print the information below and sign as indicated.)

Student's Name: \_\_\_\_\_

Parent(s)/Legal Guardian(s):  
\_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

School Name: \_\_\_\_\_

I hereby consent to the use of my child's voice, image, likeness, and performance, and its assigns, for all projects related to the Magnolia High School Music Department. I understand that the video performance can appear on [www.youtube.com](http://www.youtube.com), on our Facebook page, Twitter page, Instagram, School Website, and on DVD's to showcase our school's musical performances for parents use as well as school use. Magnolia High School Music Department will be the sole owner and will not use anything attained for profit or slander.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date



## **2023-2024 Uniform/Equipment Rental Contract**

Band members will be assigned a coat, bibs, cape, helmet, baldric, garment bag, raincoat, and more. You are responsible for all of these items. If they are lost, you will have to replace them. If, at any time, the student notices any part of the uniform going bad or damaged, the director must be notified immediately. Each uniform costs approximately \$600.00. Accidents do occur; however, you are responsible for eliminating as many accidents as possible. Students who borrow a school instrument or other equipment are responsible for the care and maintenance of the instrument or other equipment. Any misuse of instruments or equipment will not be tolerated. If something breaks due to wear and tear, please notify the director immediately.

Guard members will be issued the blue and gold tunic. If a show uniform is needed, guard members will fundraise and purchase this item. The show uniform is yours to keep. However, the blue and gold tunic must be returned at the end of the season. Guard members will be issued the following items: Silks, poles, rifles, sabers, and/or props. Members are responsible for their upkeep.

I, \_\_\_\_\_, understand that I will be responsible for

replacing any part of the uniform or equipment if there is any damage due to lack of care and maintenance, abuse, loss, or negligence.

**Student:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent/Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_



## 2023-2024 Magnolia High School Performance Policy

Performances are an integral part of many music classes such as band and choir. Students in these classes spend many rehearsals studying and preparing music, which is to be performed outside of class time. These performances may take place both during school and after school. For students to take part in such groups, participation in performances is mandatory. Educationally, this is important as performance is the demonstration and application of classroom learning. In addition, preparation for concerts teaches qualities important to the 21<sup>st</sup> century job market. These include dependability, responsibility, cooperation, and collaboration. Each member is responsible for providing a part of the total sound. Therefore, the team needs all members present.

Every effort is made to provide advanced notice concerning performance dates. The dates of major evening concerts are available at the beginning of the school year and are contained on the district calendar website. Additional performance are sometimes added during the year according to demand. When this happens, the teacher will give details to your child in a reasonable time before the scheduled events.

Naturally, rare circumstances do make it impossible for a student to participate in a performance. Three situations are considered acceptable.

1. Document illnesses of the student
2. Extreme family emergencies, such as the death of a close family member.
3. Unavoidable situations. (Can be rejected by director)

Students are also responsible for knowing their music, drill, and anything else pertaining to the class. I understand that our organization shares between sports, but this is not an excuse to not know your class work. If help is needed in anything, I am available. If a student does not know their material for a show, I have no choice but to sit them out until they are prepared.

Failure to abide by these guidelines will result in the course proficiency not being satisfied and a failing grade for the performance. For those excused absences, supplemental make-up work may be assigned for the lost performance experience. This work will involve an additional performance or study related to the missed activity. It is the student's responsibility to meet with the teacher, who will determine the format and content of the work.

By signing this agreement, all parties agree to the terms as described and will be responsible for upholding its terms.

---

Parent/Guardian Signature

---

Date

---

Student Signature

---

Date



Allergies: \_\_\_\_\_

2023-2024 BASIC HEALTH CARE COVERAGE & EMERGENCY INFORMATION  
MAGNOLIA HIGH SCHOOL ATHLETICS

NAME \_\_\_\_\_ GRADE \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ MOTHER'S NAME \_\_\_\_\_

MOTHER'S MAIDEN NAME \_\_\_\_\_ HOME PHONE # \_\_\_\_\_

FATHER'S EMPLOYER \_\_\_\_\_ PHONE # \_\_\_\_\_

MOTHER'S EMPLOYER \_\_\_\_\_ PHONE # \_\_\_\_\_

RESIDENCE ADDRESS \_\_\_\_\_

ANOTHER PERSON TO CONTACT \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ PHONE # \_\_\_\_\_

INSURANCE COMPANY NAME \_\_\_\_\_

POLICY AND/OR GROUP NUMBERS \_\_\_\_\_

ALLERGIES \_\_\_\_\_

HEALTH PROBLEMS \_\_\_\_\_

FAMILY PHYSICIAN \_\_\_\_\_ PREFERRED OTHER \_\_\_\_\_

This is to certify that the above-named participant has basic health care coverage as described above.

Any injuries or illness sustained by the participant while participating in athletics will be first claimed with the above-named company or agency. Magnolia High School will not be held liable for any financial obligations in connection with any injury or illness.

I hereby grant consent to Magnolia High School and any of its agents to secure medical treatment for the above-named participant.

**PARENT/GUARDIAN'S SIGNATURE** \_\_\_\_\_

DATE \_\_\_\_\_





**MAGNOLIA HIGH SCHOOL**  
**ATHLETIC DEPARTMENT**

**INTERSCHOLASTIC STUDENT - ATHLETE POLICIES AND AGREEMENT**

The following general policies shall govern each participant in any phase of the Magnolia High School interscholastic athletic. Program. By signing and returning the final page of this Interscholastic Student – Athlete Policies and Agreement, the student and parent(s) certify that the policies and agreement have been read and agreed to.

I. Adherence to Rules of the West Virginia Secondary Schools Activities Commission

The student will abide by all the rules and regulations of the WVSSAC. Copies of the rules are available in the office of the Director of Athletics.

II. Eligibility

The student must meet all the age, enrollment, attendance, and scholastic requirements established by the WVSSAC. These requirements are listed on the physical examination form or they may be obtained from the office of the Director of Athletics.

III. Forms and Releases

Before a student may participate in any sport, including try-outs and practices, he/she must have submitted the following to the Director of Athletics:

- Completed physical examination
- Completed permission forms for participation, travel, and emergency medical care
- Emergency notification form
- Birth certificate
- Certification of insurance
- Student – Athlete Policies Agreement

IV. Attendance Before and After Contests

Participants are expected to attend all classes on the day of the event and on the next school day following the event. In order to participate in an event, the student will attend at least half the school day on the day of the event unless an excuse is issued by the office. A student who habitually misses part of the school day or who is habitually late for school will face the possibility of being suspended from the next activity/practice they are scheduled to participate in. The Principal, Asst. Principal, and/or Athletic Director will make the determination of what is habitual in these cases.

V. Attendance at Practices and Team Meetings

Team members are expected to be present at all practices, team meetings, contests, and special occasions unless excused by the head coach. A student is not to practice if he/she is absent unless excused by the office.

VI. Care of School Equipment

The participant is responsible for all items issued to him/her. Lost, stolen or damaged equipment must be paid for before grades are issued or graduation is permitted.

VII. Transportation to Athletic Contests

All team members and associated personnel shall travel to and from events by means of transportation arranged by the Director of Athletics. Only parents may transport their own child from an event (authorization required).

VIII. Medical Release to Again Participate

Any participant suffering a serious injury must have a medical release (signed by a medical professional) prior to returning to practice or competition. No practice or competition is permitted on a day missed because of injury or illness.

IX. Personal Conduct

Participation in Magnolia High School Athletics is a privilege and participants must earn the right to represent Magnolia High School by conducting themselves in such a way that the image of MHS is not tarnished in any manner. Any participant whose conduct is deemed to reflect a discredit upon himself/herself, his/her respective team or Magnolia High School, whether or not such activity takes place during or outside school hours and sessions of the athletic season, will be subject to disciplinary action as determined by the coach, the director of athletics and/or the principal. In particular, Magnolia High School student-athletes are not to be present at establishments where the serving of alcoholic beverages the major business.

X. Use of Tobacco, Alcohol or Drugs

The use of tobacco, drinking of alcoholic beverages and illegal use of drugs are prohibited both in and out of season as well as when school is not session. Student-athletes are not to be present at functions where alcoholic beverages are being served or consumed by under-aged individuals. Attendance at so-called "keg parties" or "beer blasts" or functions at private homes when alcohol is being served (illegally) will result in a full investigation of the incident and that taking of any appropriate action. Impaired athletes are a liability, not an asset.

#### XI. Quitting a Team

If a participant “quits” a team, he/she is not eligible for another sport which has already begun. This does not apply to a person who is “cut.”

#### XII. Letters and Awards

Letters and awards will be given as specified in the school awards program. All participants are expected to attend these programs.

#### XIII. Team and Individual Discipline

Each coach shall have rules for minor infractions. These rules should be in writing and approved by the Director of Athletics and the Principal.

#### XIV. Suspension From Team

Temporary suspension may be made by the coach, Director of Athletics or Principal. The Director of Athletics or Principal shall confer with the head coach prior to any suspension. Reasons for suspension may be, but are not limited to any of the following:

- Grades
- Personal misconduct
- Unexcused absences
- Violations of athletic policies
- Unsportsmanlike conduct
- Investigative period

No practices or competition permitted during periods of suspension.

#### XV. Removal From a Team

Removal from a team will be made by the coach of the respective sport, the Director of Athletics or the Principal. The Director of Athletics or the Principal shall consult with the head coach of the sport before any removal action is taken. Causes for removal from a team may include, but are not limited to, the following:

- Use of alcohol, tobacco or illegal use of or possession of drugs not prescribed for the individual by a physician
- Repeated violations of school athletic or team policies
- Personal misconduct that involves police or court action either during or outside school hours and the sports season
- Verbal or physical attack upon any opponent, official, teacher, fan, coach or any other person
- Continued acts of unsportsmanlike conduct
- Repeated violations of school conduct rules

## XVI. Due Process

A student shall be given written notice of intention to suspend and/or remove him/her from his/her respective team . The notice shall be delivered by the person handing down the suspension or removal. The basic reason for the suspension or removal shall be stated. The parents or legal guardian has the right to request an informal hearing to discuss the proposed actions and the cause thereof. The informal hearing shall be requested within two (2) days from the date the parents received the notice concerning the proposed suspension or removal. The informal hearing shall be held within two (2) days of the parental/guardian request unless there exist unusual circumstance. A decision will be made within two (2) days of the conclusion of the informal hearing.

The participant together with his/her parents/legal guardian has the right to appeal the decision from the informal hearing to an appeals board consisting of the Assistant Principal, the Director of Athletics and a teacher appointed by the principal. The board shall hear the appeal within two (2) days of the request for such a meeting. The appeals board will render its decision within (2) days from the time in concludes its investigation and deliberations. The appeals board shall notify the Principal and all other interested parties of their decision in the matter.

Nothing in this section denies the student and/or parent/legal guardian the right to appeal all decisions to the Superintendent of Wetzel County Schools, the Wetzel County Board of Education or the Circuit Court of Wetzel County.

## XVII. Discrimination Prohibited

As required by federal laws and regulations, the Wetzel County Board of Education does not discriminate on the basis of sex, race, color, religion, handicapping condition, marital status, or national origin in employment or in its educational programs and activities. Inquiries may be referred to: Title IX Coordinator, Wetzel County Board of Education, 333 Foundry St., New Martinsville, WV 26155, phone number 455-2441; or to the Department of Education's Director of the Office for Civil Rights.

Any student-athlete over the age of eighteen will not have a parental notification carried out unless there is a request to do so.

PARENTS AND STUDENTS ARE ENCOURAGED TO RETAIN THE FIRST FOUR PAGES OF THE ATHLETIC POLICIES AND AGREEMENT FOR REFERENCE DURING THE SCHOOL YEAR.

ANY QUESTIONS THAT ARISE SHOULD BE ADDRESSED IMMEDIATELY TO THE DIRECTOR OF ATHLETICS, THE ASSISTANT PRINCIPAL OR THE PRINCIPAL. MAGNOLIA HIGH SCHOOL SUPPORTS THE CONCEPT OF A "CHAIN OF COMMAND" AND WILL GIVE FAIR CONSIDERATION TO ANY AND ALL INQUIRIES MADE IN REGARD TO ITS ATHLETIC PROGRAMS.

2023-2024 MAGNOLIA HIGH SCHOOL  
ATHLETIC AND MUSIC DEPARTMENT

ATHLETIC AND MUSIC POLICIES CERTIFICATION

We, the undersigned, have read the above Athletic and Music Policies and Agreement of Magnolia High School. We acknowledge that we fully understand the rules and consequences as set forth and agree that all reasonable efforts will be made to abide by these rules. We have kept the first four pages for our reference during the school year.

STUDENT'S NAME \_\_\_\_\_

DATE \_\_\_\_\_

STUDENT'S SIGNATURE \_\_\_\_\_

PARENT/GUARDIAN'S SIGNATURE \_\_\_\_\_



2023-2024 PARENT OR LEGAL GUARDIAN PERMISSION FOR  
PARTICIPATION, TRAVEL, AND EMERGENCY CARE

By its nature, participation in interscholastic athletics includes risk of injury which may range in severity from minor to disabling to even death. Although serious injuries are not common in supervised school athletic programs, it is impossible to eliminate the risk. Participants can and have the responsibility to help reduce the chance of injury. Players must obey all safety rules, report all physical problems to their trainer or coach, follow a proper conditional program and inspect their equipment daily for problems.

By signing this permission form, we acknowledge that we have read the above information. PARENTS AND STUDENTS WHO DO NOT WISH TO ACCEPT THE RISKS DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS PERMISSION FORM.

I hereby give my consent for \_\_\_\_\_

1. To represent Magnolia High School in approved athletic activities;
2. To accompany any school team of which he/she is a member on its local or out-of-town trips;
3. To receive, through a medical doctor of the school's choice, emergency medical care which may become reasonably necessary in the course of such athletic activities or such travel.

**PARENT/GUARDIAN'S SIGNATURE** \_\_\_\_\_

DATE \_\_\_\_\_

I have read the statements above and will abide by the principles and regulations contained in them.

**STUDENT'S SIGNATURE** \_\_\_\_\_





## **2023-2024 ACKNOWLEDGMENT**

We the undersigned are the Parent(s) and/or Legal Guardian(s) of \_\_\_\_\_, a student at Magnolia High School. The student desires to participate in the following extracurricular activities during the 2023-2024 academic year: (mark all that apply)

- |                                     |  |                                     |
|-------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Football   | <input type="checkbox"/> Cross Country | <input type="checkbox"/> Golf       |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Wrestling     | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Baseball   | <input type="checkbox"/> Cheerleading  | <input type="checkbox"/> Softball   |
| <input type="checkbox"/> Track      | <input type="checkbox"/> Soccer        | <input type="checkbox"/> Tennis     |
| <input type="checkbox"/> Band       |  |                                     |

We understand that there is a substantial risk of injury to the student while participating in these activities and that there is an enhanced possibility of injury to those who participate in contact sports. We have considered the risk of injury to the student and discussed the existence of those risks with the student who, nevertheless, desires to participate. We hereby consent to his/her participation in each of those activities identified above.

In light of the risk of injury to the student, we hereby understand the necessity for providing medical coverage. The following describes the insurance status of the student (check one):

- ☐ We have reviewed the terms and conditions of our coverage and are satisfied that in the event of injury there exists coverage to provide treatment and care to the student.

Name of Insurance Carrier \_\_\_\_\_  
Policy No. \_\_\_\_\_

- ☐ The student has no medical coverage and any injury-related medical expenses resulting from injury to the student will be borne by me/us.

In signing this document, it acknowledged that we/I understand that the student may get hurt, and that we/I have made an informed decision, in consultation with the student, to approve the consent to his/her participation. We further acknowledge that the Wetzel County Board of Education is not responsible for payment of medical bills incurred as a result of any injury suffered by the student while participating in the previously identified extracurricular activities.

\_\_\_\_\_  
**Signature Parent(s)/Legal Guardian(s)**

Executed this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

I, \_\_\_\_\_, the undersigned student, have reviewed this Acknowledgment with my parent(s)/legal guardian(s) and fully understand that I might get hurt while participating in the previously identified extracurricular activities. I also understand that the Wetzel County Board of Education is not responsible for payment of any expenses that may be incurred for treatment of any injury I may suffer. I have considered the risks associated with participation in the above extracurricular activities and have nevertheless made an informed decision to participate.

\_\_\_\_\_  
**Student Signature**



**WETZEL COUNTY SCHOOLS  
AUTHORIZATION TO ADMINISTER  
OVER THE COUNTER MEDICATIONS**

If medication can be given at home or after school hours, please do so. However, if an over-the-counter medication must be given during school hours this form must be completed. Using one for each medication.

**NO NOT USE THIS FOR FOR PRESCRIPTION MEDICATION**

- If you need to take prescription medication, please see school nurse or Mr. Hoskins.

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Teacher: \_\_\_\_\_ Grade: \_\_\_\_\_

**The school nurse will not be administering over the counter medications without a physicians order.**

I request that \_\_\_\_\_ School, through the principal, or designee, assist in the administering medication to my child, according to instructions the statements below. I understand that:

- Medications must be in the original labeled container (no baggies, foil, etc)
  - Parent/guardian must provide specific instructions, as well as the medication
  - It will be the responsibility of the parent/guardian to inform that school of any changes. New medication or new doses will not be given unless a new form is completed.
  - Unused medication will be disposed of unless picked up by the guardian within 30 days after the authorizations expires or on the last day of school.
  - Students in grades 9-12<sup>th</sup> may carry and administer their own medication with a completed form on file at the school.
- .....

Name of Medication: \_\_\_\_\_

Dose: \_\_\_\_\_ Route (by mouth, topical, etc) \_\_\_\_\_

Time(s) to be given: \_\_\_\_\_ Stop Medication on: \_\_\_\_\_

Condition/Illness Requiring Medication: \_\_\_\_\_

Possible Side Effects, if any: \_\_\_\_\_

Check One:

\_\_\_\_ I hereby authorize the personnel of Wetzel County Schools to administer my child an over-the-counter medication according to policy.

\_\_\_\_ I authorize permission for my child who is in grade 9-12 to carry and self-administer their over-the-counter medicine, pending building administrator approval.

I understand that in the event of a change in medicine, I am responsible for presenting a new request form.

\_\_\_\_\_  
**Parent/ Legal Guardian Signature**

\_\_\_\_\_  
Date

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_





# WEST VIRGINIA SECONDARY SCHOOL ACTIVITIES COMMISSION

2875 Staunton Turnpike - Parkersburg, WV 26104

## ATHLETIC PARTICIPATION/PARENTAL CONSENT/PHYSICIAN'S CERTIFICATE FORM

(Form required each school year on or after May 1<sup>st</sup>. File in School Administration Office)

### ATHLETIC PARTICIPATION / PARENTAL CONSENT

#### PART I

Name \_\_\_\_\_ School Year: \_\_\_\_\_ Grade Entering: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Address of Parents: \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Last semester I attended \_\_\_\_\_ (High School) or (Middle School). We have read the condensed eligibility rules of the WVSSAC athletics. If accepted as a team member, we agree to make every effort to keep up school work and abide by the rules and regulations of the school authorities and the WVSSAC.

#### INDIVIDUAL ELIGIBILITY RULES

Attention Athlete! To be eligible to represent your school in any interscholastic contest, you:

- \_\_\_\_\_ must be a regular bona fide student in good standing of the school. (See exception under Rule 127-2-3)
- \_\_\_\_\_ must qualify under the Residence and Transfer Rule (127-2-7)
- \_\_\_\_\_ must have earned at least 2 units of credit the previous semester. Summer School may be included. (127-2-6)
- \_\_\_\_\_ must have attained an overall "C" (2.00) average the previous semester. Summer School may be included. (127-2-6)
- \_\_\_\_\_ must not have reached your 15th (MS), 19th (HS) birthday before August 1 of the current school year. (127-2-4)
- \_\_\_\_\_ must be residing with parent(s) as specified by Rule 127-2-7 and 8.
  - \_\_\_\_\_ unless parents have made a bona fide change of residence during school term.
  - \_\_\_\_\_ unless an AFS or other Foreign-Exchange student (one year of eligibility only).
  - \_\_\_\_\_ unless the residence requirement was met by the 365 calendar days attendance prior to participation.
- \_\_\_\_\_ if living with legal guardian/custodian, may not participate at the varsity level. (127-2-8)
- \_\_\_\_\_ must be an amateur as defined by Rule 127-2-11.
- \_\_\_\_\_ must have submitted to your principal before becoming a member of any school athletic team Participation/Parent Consent/Physician Form, completely filled in and properly signed, attesting that you have been examined and found to be physically fit for athletic competition and that your parents consent to your participation. (127-3-3)
- \_\_\_\_\_ must not have transferred from one school to another for athletic purposes. (127-2-7)
- \_\_\_\_\_ must not have received, in recognition of your ability as a HS or MS athlete, any award not presented or approved by your school or the WVSSAC. (127-3-5)
- \_\_\_\_\_ must not, while a member of a school team in any sport, become a member of any other organized team or as an individual participant in an unsanctioned meet or tournament in the same sport during the school sport season (See exception 127-2-10).
- \_\_\_\_\_ must follow All Star Participation Rule. (127-3-4)
- \_\_\_\_\_ must not have been enrolled in more than (8) semesters in grades 9 to 12. Must not have participated in more than three (3) seasons while in grades 6-7-8. (Rule 127-2-5).
- \_\_\_\_\_ qualify under homeschool rule. (Rule 127-2-3.11, 127-2-7.2k, 126-26-3.1.1k)

Eligibility to participate in interscholastic athletics is a privilege you earn by meeting not only the above listed minimum standards but also all other standards set by your school and the WVSSAC. If you have any questions regarding your eligibility or are in doubt about the effect any activity or action might have on your eligibility, check with your principal or athletic director. They are aware of the interpretation and intent of each rule. Meeting the intent and spirit of WVSSAC standards will prevent athletes, teams, and schools from being penalized.

#### PART II - PARENTAL CONSENT

In accordance with the rules of the WVSSAC, I give my consent and approval to the participation of the student named above for the sport **NOT MARKED OUT BELOW**:

|              |          |          |          |            |
|--------------|----------|----------|----------|------------|
| BASEBALL     | CROSS    | GOLF     | SWIMMING | VOLLEYBALL |
| BASKETBALL   | COUNTRY  | SOCCER   | TENNIS   | WRESTLING  |
| CHEERLEADING | FOOTBALL | SOFTBALL | TRACK    | BAND       |

#### MEDICAL DISQUALIFICATION OF THE STUDENT-ATHLETE / WITHHOLDING A STUDENT-ATHLETE FROM ACTIVITY

The member school's team physician has the final responsibility to determine when a student-athlete is removed or withheld from participation due to an injury, an illness or pregnancy. In addition, clearance for that individual to return to activity is solely the responsibility of the member school's team physician or that physician's designated representative.

I understand that participation may include, when necessary, early dismissal from classes and travel to participate in interscholastic athletic contests. I will not hold the school authorities or West Virginia Secondary School Activities Commission responsible in case of accident or injury as a result of this participation. I also understand that participation in any of those sports listed above may cause permanent disability or death. Please check appropriate space: He/She has student accident insurance available through the school ( ); has football insurance coverage available through the school ( ); is insured to our satisfaction ( ).

I also give my consent and approval for the above named student to receive a physical examination, as required in Part IV, Physician's Certificate, of this form, by an approved health care provider as recommended by the named student's school administration.

I consent to WVSSAC's use of the herein named student's name, likeness, and athletically related information in reports of Inter-School Practices or Scrimmages and Contests, promotional literature of the Association, and other materials and releases related to interscholastic athletics.

I have read/reviewed the concussion and Sudden Cardiac Arrest information as available through the school and at WVSSAC.org. (Click Sports Medicine)

Date: \_\_\_\_\_ Student Signature \_\_\_\_\_ Parent Signature \_\_\_\_\_

### PART III – STUDENT’S MEDICAL HISTORY

(To be completed by parent or guardian prior to examination)

Name \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade \_\_\_\_ Age \_\_\_\_

Has the student ever had:

- Yes No 1. Chronic or recurrent illness? (Diabetes, Asthma, Seizures, etc.,)  
 Yes No 2. Any hospitalizations?  
 Yes No 3. Any surgery (except tonsils)?  
 Yes No 4. Any injuries that prohibited your participation in sports?  
 Yes No 5. Dizziness or frequent headaches?  
 Yes No 6. Knee, ankle or neck injuries?  
 Yes No 7. Broken bone or dislocation?  
 Yes No 8. Heat exhaustion/sun stroke?  
 Yes No 9. Fainting or passing out?  
 Yes No 10. Have any allergies?  
 Yes No 11. Concussion? If Yes \_\_\_\_\_  
Date(s)

- Yes No 12. Have any problems with heart/blood pressure?  
 Yes No 13. Has anyone in your family ever fainted during exercise?  
 Yes No 14. Take any medicine? \_\_\_\_\_ List  
 Yes No 15. Wear glasses \_\_\_\_, contact lenses\_\_\_\_, dental appliances\_\_\_\_?  
 Yes No 16. Have any organs missing (eye, kidney, testicle, etc.)?  
 Yes No 17. Has it been longer than 10 years since your last tetanus shot?  
 Yes No 18. Have you ever been told not to participate in any sport?  
 Yes No 19. Do you know of any reason this student should not participate in sports?  
 Yes No 20. Have a sudden death history in your family?  
 Yes No 21. Have a family history of heart attack before age 50?  
 Yes No 22. Develop coughing, wheezing, or unusual shortness of breath when you exercise?  
 Yes No 23. (Females Only) Do you have any problems with your menstrual periods.

PLEASE EXPLAIN ANY “YES” ANSWERS OR ANY OTHER ADDITIONAL CONCERNS.

I also give my consent for the physician in attendance and the appropriate medical staff to give treatment at any athletic event for any injury.

SIGNATURE OF PARENT OR GUARDIAN \_\_\_\_\_ DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

### PART IV – VITAL SIGNS

Height \_\_\_\_\_ Weight \_\_\_\_\_ Pulse \_\_\_\_\_ Blood Pressure \_\_\_\_\_

Visual acuity: Uncorrected \_\_\_\_/\_\_\_\_; Corrected \_\_\_\_/\_\_\_\_; Pupils equal diameter: Y N

### PART V – SCREENING PHYSICAL EXAM

This exam is not meant to replace a full physical examination done by your private physician.

Mouth:

Appliances Y N  
 Missing/loose teeth Y N  
 Caries needing treatment Y N  
 Enlarged lymph nodes Y N  
 Skin - infectious lesions Y N  
 Peripheral pulses equal Y N

Respiratory:

Symmetrical breath sounds Y N  
 Wheezes Y N  
 Cardiovascular:  
 Murmur Y N  
 Irregularities Y N  
 Murmur with Valsalva Y N

Abdomen:

Masses Y N  
 Organomegaly Y N  
 Genitourinary (males only);  
 Inguinal hernia Y N  
 Bilaterally descended testicles Y N

Any “YES” under Cardiovascular requires a referral to family doctor or other appropriate healthcare provider.

Musculoskeletal: (note any abnormalities)

|               |            |               |                 |
|---------------|------------|---------------|-----------------|
| Neck: Y N     | Elbow: Y N | Knee/Hip: Y N | Hamstrings: Y N |
| Shoulder: Y N | Wrist: Y N | Ankle: Y N    | Scoliosis: Y N  |

RECOMMENDATIONS BASED ON ABOVE EVALUATION:

After my evaluation, I give my:

- \_\_\_\_\_ Full Approval;  
 \_\_\_\_\_ Full approval; but needs further evaluation by Family Dentist \_\_\_\_; Eye Doctor \_\_\_\_; Family Physician \_\_\_\_; Other \_\_\_\_;  
 \_\_\_\_\_ Limited approval with the following restrictions: \_\_\_\_\_;  
 \_\_\_\_\_ Denial of approval for the following reasons: \_\_\_\_\_.

MD/DO/DC/Advanced Registered Nurse Practitioner/Physician's Assistant

Date



# DON'T LET AN **INJURY** LEAD TO AN OPIOID **ADDICTION**

**2 MILLION ATHLETES** ARE EXPECTED TO SUFFER A **SPORTS INJURY** THIS YEAR

MANY OF THESE ATHLETES WILL BE PRESCRIBED **OPIOID PAINKILLERS**

**75% OF HIGH SCHOOL HEROIN USERS** STARTED WITH PRESCRIPTION OPIOIDS

## HIGH SCHOOL ATHLETES ARE AT RISK OF BECOMING ADDICTED TO PRESCRIPTION DRUGS

- 28.4% used medical opioids at least once over a three year period.
- 11% of high school athletes have used an opioid medication for nonmedical reasons.
- Nearly 25% of students who chronically use prescription opioids also use heroin.

## WHAT ARE OPIOIDS?

Opioids are a powerful and addictive type of prescription painkiller that have similar chemical properties and addiction risks as heroin. While opioids may provide temporary relief, they do nothing to address the underlying injury and can have serious side effects.

**These drugs may lead to: dependence, tolerance, accidental overdose, coma and death.**

The most common prescribed opioid painkillers in West Virginia are:

- Oxycodone (OxyContin)
- Hydrocodone (Lortab and Vicodin)

## HOW TO PROTECT YOUR CHILD

- Talk to your healthcare provider about alternative pain management treatment options (see below).

First-time prescription opioid users have a 64% higher risk of early death than patients who use alternative pain medication.

- If your child is prescribed an opioid painkiller, talk about the dangers of misusing medication, including overuse and medication sharing.
- Monitor your child's intake of prescription medication to ensure he/she is following dosage instructions.
- Safely dispose of any unused medication through a prescription drug drop box or a DEA Take-Back program.

## NON-NARCOTIC PAIN MANAGEMENT **ALTERNATIVES**

Physical Therapy  
Chiropractic  
Massage Therapy  
Acupuncture  
Over-the-Counter Medication



**WEST VIRGINIA**  
ATTORNEY GENERAL'S OFFICE



**West Virginia**  
Board of  
Medicine



# HEADS<sup>x</sup>UP

## CONCUSSION IN HIGH SCHOOL SPORTS

### A FACT SHEET FOR PARENTS

#### What is a concussion?

A concussion is a type of traumatic brain injury. Concussions are caused by a bump or blow to the head. Even a "ding," "getting your bell rung," or what seems to be a mild bump or blow to the head can be serious.

You can't see a concussion. Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury. If your child reports any symptoms of concussion, or if you notice the symptoms yourself, seek medical attention right away.

#### What are the signs and symptoms of a concussion?

If your child has experienced a bump or blow to the head during a game or practice, look for any of the following signs of a concussion:

| SYMPTOMS REPORTED BY ATHLETE  | SIGNS OBSERVED BY PARENTS/GUARDIANS   |
|---|---|
| <ul style="list-style-type: none"> <li>• Headache or "pressure" in head</li> <li>• Nausea or vomiting</li> <li>• Balance problems or dizziness</li> <li>• Double or blurry vision</li> <li>• Sensitivity to light</li> <li>• Sensitivity to noise</li> <li>• Feeling sluggish, hazy, foggy, or groggy</li> <li>• Concentration or memory problems</li> <li>• Confusion</li> <li>• Just "not feeling right" or "feeling down"</li> </ul> | <ul style="list-style-type: none"> <li>• Appears dazed or stunned</li> <li>• Is confused about assignment or position</li> <li>• Forgets an instruction</li> <li>• Is unsure of game, score, or opponent</li> <li>• Moves clumsily</li> <li>• Answers questions slowly</li> <li>• Loses consciousness (even briefly)</li> <li>• Shows mood, behavior, or personality changes</li> </ul> |

#### How can you help your child prevent a concussion or other serious brain injury?

- Ensure that they follow their coach's rules for safety and the rules of the sport.
- Encourage them to practice good sportsmanship at all times.
- Make sure they wear the right protective equipment for their activity. Protective equipment should fit properly and be well maintained.
- Wearing a helmet is a must to reduce the risk of a serious brain injury or skull fracture.
  - However, helmets are not designed to prevent concussions. There is no "concussion-proof" helmet. So, even with a helmet, it is important for kids and teens to avoid hits to the head.

#### What should you do if you think your child has a concussion?

**SEEK MEDICAL ATTENTION RIGHT AWAY.** A health care professional will be able to decide how serious the concussion is and when it is safe for your child to return to regular activities, including sports.

**KEEP YOUR CHILD OUT OF PLAY.** Concussions take time to heal. Don't let your child return to play the day of the injury and until a health care professional says it's OK. Children who return to play too soon—while the brain is still healing—risk a greater chance of having a repeat concussion. Repeat or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

**TELL YOUR CHILD'S COACH ABOUT ANY PREVIOUS CONCUSSION.** Coaches should know if your child had a previous concussion. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell the coach.

#### If you think your teen has a concussion:

Don't assess it yourself. Take him/her out of play. Seek the advice of a health care professional.

**It's better to miss one game than the whole season.**

For more information, visit [www.cdc.gov/Concussion](http://www.cdc.gov/Concussion).







# WVSSAC

## SUDDEN CARDIAC ARREST AWARENESS



### What is Sudden Cardiac Arrest?

- Occurs suddenly and often without warning.
- An electrical malfunction (short-circuit) causes the bottom chambers of the heart (ventricles) to beat dangerously fast (ventricular tachycardia or fibrillation) and disrupts the pumping ability of the heart.
- The heart cannot pump blood to the brain, lungs and other organs of the body.
- The person loses consciousness (passes out) and has no pulse.
- Death occurs within minutes if not treated immediately.

### What are the symptoms/warning signs of Sudden Cardiac Arrest?

- SCA should be suspected in any athlete who has collapsed and is unresponsive
- Fainting, a seizure, or convulsions during physical activity
- Dizziness or lightheadedness during physical activity
- Unusual fatigue/weakness
- Chest pain
- Shortness of breath
- Nausea/vomiting
- Palpitations (heart is beating unusually fast or skipping beats)
- Family history of sudden cardiac arrest at age <50

ANY of these symptoms/warning signs may necessitate further evaluation from your physician before returning to practice or a game.

### What causes Sudden Cardiac Arrest?

- Conditions present at birth (inherited and non-inherited heart abnormalities)
- A blow to the chest (Commotio Cordis)
- An infection/inflammation of the heart, usually caused by a virus. (Myocarditis)
- Recreational/Performance-Enhancing drug use.
- Other cardiac & medical conditions / Unknown causes. (Obesity/Idiopathic)

### What are ways to screen for Sudden Cardiac Arrest?

- The American Heart Association recommends a pre-participation history and physical which is mandatory annually in West Virginia.
- Always answer the heart history questions on the student Health History section of the WVSSAC Physical Form completely and honestly.
- Additional screening may be necessary at the recommendation of a physician.

### What is the treatment for Sudden Cardiac Arrest?

- Act immediately; time is critical to increase survival rate
- Activate emergency action plan
- Call 911
- Begin CPR
- Use Automated External Defibrillator (AED)

### Where can one find additional information?

- Contact your primary health care provider
- American Heart Association ([www.heart.org](http://www.heart.org))