



Second Mesa Day School Mighty Bobcats

P.O. Box 98 Second Mesa, Az 86043. Phone: 928-737-2571. Fax: 928-737-2565

SECOND MESA DAY SCHOOL “Home of the Mighty Bobcats”

YEARLY ATHLETIC & P.E. PACKET

NAVA-HOPI AREA JR. HIGH LEAGUE

- Pee Wee Cross Country (Kindergarten – 2nd)
- Cross Country (3rd – 6th)
- Volleyball (3rd – 6th)
- Flag Football (3rd – 6th)
- Basketball (3rd – 6th)
- Cheerleading (Kindergarten – 6th)
- Co-Ed Softball (4th – 6th)
- Co-Ed Soccer (3rd – 6th)

HOPI ELEMENTARY ATHLETIC LEAGUE

- Cross Country (3rd – 6th)
- Basketball (3rd – 6th)
- Cheerleading (3rd – 6th)

2022/2023



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Annual Health Questionnaire for Sports Participation Grades K – 6th

Please indicate League Participation for your Student(s) below:

☐ Navajo-Hopi Area Jr. High League (K-6th)

☐ Hopi Elementary Athletic League (3rd -6th)

Students Name: _____

Grade Level: _____

D.O.B. _____

Gender: Male – Female

Parents/Guardians Name: _____ Phone Number: _____

Family Physician: _____ Phone Number: _____

Allergies: _____

Please answer the following questions by circling the answer:

- | | | |
|--|-----|----|
| 1. During the past 12 months, was your child hospitalized? | YES | NO |
| 2. During the past 12 months, has your child had surgery? | YES | NO |
| 3. During the past 12 months, has your child had any injuries that required medical attention? | YES | NO |
| 4. Does your child take medication daily? | YES | NO |
| 5. Do you feel that there should be limits on your child's sports participation, because of symptoms of illness or injury? | YES | NO |
| 6. Do you feel there should be limits on your child's sports participation, because of family history? | YES | NO |
| 7. Has your child ever fainted while exercising? | YES | NO |

If you answered "YES" to any of the above questions, your child will need a pre-participation physical exam by a physician to be cleared to play. Please arrange the appointment.

We, the undersigned have answered the above questions to the best of our ability. The information given is accurate, and we understand the school personnel will rely on the information provided.

Parent/Guardian Signature

Date



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Sports/Activities

CONSENT FOR EMERGENCY CARE FORM

STUDENT-ATHLETE NAME: _____

Be it known that I, the undersigned parent or legal guardian of the student stated above 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 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 a Second Mesa Day School sponsored activity of the H.E.A.L and the N.H.A.J.H.L league, hereby give my permission to the coaches to administer first aid to my son/daughter. It is hereby understood that the consent and authorization hereby given and granted are intended by me to extend throughout the current school year.

SIGNATURE: _____
(Parent or Legal Guardian)

DATE: ____/____/____

Home Phone Number: _____

Cell Phone #: _____

Bobcat Athletics Mission Statement

"Second Mesa Day School Bobcat Athletics (SMDS) provides positive and encouraging extra-curricular opportunities to all student-athletes. Bobcat Athletics is committed to excellence in athletics by acquire skills needed to develop positive self-esteem and positive self-confidence as a student-athlete, while supporting the educational mission in creating a positive and safe learning environment at Second Mesa Day School."

Requirements for practice:

Students are required to bring items & clothing for practice such as (t-shirt, short cuts, athletic shoes & water bottle). Lockers are offered for storage of practice apparel to minimize absence from practice. **(Provide own combination lock, NO KEY LOCKS ALLOWED)**

Parent Initial _____

Student Initial _____



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School Requirements:

Weekly progress reports are completed by their homeroom teachers for eligibility purposes. If your student-athlete is eligible for the week, they will remain after school for practice and participate in any upcoming sporting events. If they are ineligible, they will not be allowed to participate in practice & games/meets until their status changes to eligible,

Parent Initial _____ Student Initial _____

Zero Tolerance for Misbehavior:

Bullying, Suspension & or Conduct referrals to the principal, or assistant principal office will not be tolerated. If evidence is present to the coaching staff, there will be consequences and possible removal from the team, as well as determining further participation in all school sports for the **2022-2023** school year. At practice, meets & games your son/daughter is representing SMDS bobcats, as well as your families, therefore all inappropriate behavior or foul language will not be tolerated and may result in non-participation. The athletic department is enforcing a 3-strike system for the entire **2022-2023 SY**, that will reflect on their behavior school wide & will determine their participation in all school sports for the academic year.

Parent Initial _____ Student Initial _____

Expectations of a Student-Athlete:

Here at SMDS, the coaching staff encourages our students to become positive self-motivated student-athletes, that lead by example of being role models. When we travel and enter another school environment, we want to demonstrate how great our student-athletes portray their bobcat spirit through positive sportsmanship. However, before a student can decide to become a bobcat, he/she will need to demonstrate **PAWSOME** attributes in the classroom.

WE ENCOURAGE and support each student-athlete to strive for excellence in the classroom to maintain their academic and sports eligibility. **A 60 MINUTE STUDY HALL** is mandatory for all student-athletes to help with their school homework for the day. If a student-athlete has no homework, he/she is **REQUIRED TO BRING AN A.R. BOOK.**

SPORTSMANSHIP is what we encourage here at SMDS, and as coaches we would appreciate all parents/guardians to support & encourage your student-athlete to demonstrate this important quality that reflects not only the team, but the families as well. This is a quote we share among the student-athletes,
“Winning is not everything, to succeed you first have to lose, before you learn to win”

Parent Initial _____ Student Initial _____



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Conduct of Parents:

SMDS athletics encourages parent/guardian to support their student-athlete while participating, by demonstrating positive behavior and sportsmanship. Our behavior and attitudes reflect on who we are as role models for our student-athletes. SMDS athletics also emphasizes parents/guardians to be respectful to all student-athletes and coaches while in season. Protocol for addressing concerns from parents/guardians is to be followed: (1st. Head Coach, 2nd Head Coach & Principal). **Parents/Guardians must understand and be respectful to all involved in Second Mesa Day School Athletics by refraining from using social media (Facebook, Instagram, Sanp Chat, Tik Tok, etc) as a negative outlet.** Any concerning situations will be brought to Coaches, and principal to ensure proper procedures are followed and resolved in a respectable manner. We appreciate you taking the time to read and initial where needed. We look forward to establishing a great supportive network for all Bobcat student-athletes.

Parent Initial _____

Parent Signature: _____
(Parent or Legal Guardian)

Date: ____/____/____

Student Signature: _____
(Student-Athlete)

Date: ____/____/____

If you have any questions, feel free to call Mr. Lomayaoma @ 928-737-2571 ext 4217.

Received on: ____/____/____

By: _____
(Physical Education Teacher)