

**PORTLAND PUBLIC SCHOOLS EXTRACURRICULAR
ACTIVITIES CODE OF CONDUCT AGREEMENT**

By their signature, students and their parents acknowledge that they understand and agree to adhere to the PPS Extracurricular Activities Code of Conduct. Disciplinary action taken under this code by a coach, activity director, or athletic director may be appealed to the principal of the school. It is recognized that individual activity directors or coaches may have additional rules and regulations for their students in areas not covered by this Code.

**I HAVE READ AND UNDERSTAND THE CODE OF CONDUCT AND BY MY SIGNATURE
AGREE TO ABIDE BY IT.**

STUDENT SIGNATURE **DATE**

**I HAVE READ AND UNDERSTAND THE CODE TO WHICH THE STUDENT IN MY CUSTODY
HAS AGREED TO BY HIS/HER SIGNATURE.**

PARENT/GUARDIAN SIGNATURE **DATE**

WAIVER OF LIABILITY-EXTRA/CO-CURRICULAR ACTIVITY TRANSPORTATION

I hereby give my permission for _____ of _____
Student Name School Name

to participate in _____
Name of Activity(ies)

at locations away from the school within the City of Portland. In giving my permission, I understand that the school department is not providing transportation to or from the above extra/co-curricular activity within the City of Portland, and agree that I am therefore solely responsible for transporting my son/daughter to and from that activity, and for taking all precautions necessary to do so in a safe and adequate manner.

Because the school department is not providing transportation, within the City of Portland, and therefore cannot control such transportation, I agree to release and hold the school department and its agents and employees harmless from any liability, claims, demands, costs, or damages arising out of any such transportation which I or my son/daughter might have.

**I have read this document carefully, and sign it voluntarily with full knowledge of its
significance.**

Signature of Parent/Guardian **Date**

NOTE: This form must be signed in order for the student to participate in the activity(ies) above.

**PORTLAND PUBLIC SCHOOLS
WARNING FORM**

SPORT/ACTIVITY (CHECK ONE)

- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Drama | <input type="checkbox"/> Softball |
| <input type="checkbox"/> Band | <input type="checkbox"/> Field Hockey | <input type="checkbox"/> Swimming |
| <input type="checkbox"/> Baseball | <input type="checkbox"/> Football | <input type="checkbox"/> Tennis |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Golf | <input type="checkbox"/> Track Indoor |
| <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Ice Hockey | <input type="checkbox"/> Track Outdoor |
| <input type="checkbox"/> Cross Country | <input type="checkbox"/> Soccer | <input type="checkbox"/> Wrestling |

WARNING, AGREEMENT TO OBEY INSTRUCTIONS, REPORT INJURIES, AND PARENTAL PERMISSION

I am aware that playing or practicing to play/participate in any co-curricular activity can be dangerous activity involving many risks or injury. I understand that the dangers and risks of playing or practicing to play/participate in the above co-curricular activity include risk of serious injury. Because of those dangers and risks, I recognize the importance of following coaches/advisors instructions regarding playing and training techniques, team or program rules, etc. and agree to obey such instructions.

I agree to report to my coach, advisor or principal any injuries that occur to me within 24 hours of their occurrence.

Date: _____
Signature of Student

I, the parent/guardian of _____, understand the
Name of Student
dangers and risks involved in the co-curricular activity as indicated above. Recognizing those dangers and risks, I give permission for my son/daughter to participate in all activities of the co-curricular activity.

Date: _____
Signature of Parent/Guardian

Note: This form is for student participation in extramural or intramural co-curricular activities. This form must be signed and returned in advance to the student's building principal for the student to participate in the co-curricular activity.

I give permission for my son/daughter to use the school's whirlpool bath for minor injuries, with approval from the school athletic trainer or supervisor of the sport/athletic activity.

Date: _____
Signature of Parent/Guardian

SPRING SPORTS SIGN UPS
PLEASE SIGN UP ON LEAGUEMINDER. Physicals must be within the past 2 years and on file with Joyce in the Main Office.

Call the athletic office with any questions 874-8257

PORTLAND HIGH SCHOOL SPORTS SIGN UPS

***** **ONLINE SIGN UPS** *****

- You can sign up from your home computer, or use a computer here at school
- Log onto WWW.Leagueminder.com
- Click **VIEW MY SCHEDULE** on right side of home page
- Next click on STUDENT/PLAYER also on the right side
- Click FIND YOUR STATE
- Click on **SIGN UP TODAY**
- Please select your role as STUDENT/PLAYER and hit proceed at bottom of page
- Read instructions and proceed under Student Registration

