RETURN TO CONDITIONING HANDBOOK
PHASE I - SUMMER CONDITIONING
JUNE 2020
This handbook provides direction for schools for a safe return to conditioning in accordance with the National Federation of High School Sports, Georgia High School Association and DeKalb County School District restrictions. All coaches and students are required to follow all guidelines set forth in this document. As conditions during this pandemic continually evolve, this handbook will be updated as necessary.

In accordance with the guidelines published by the Georgia High School Association, DCSD is limiting Phase I: Summer Conditioning to groups of 20 persons, including coaches, for all workouts per sport, across all times at each campus/facility. **Only FALL VARSITY GHSA sanctioned sports** will be allowed to start this initial phase of conditioning. Middle school sports remain suspended pending further guidance from GHSA.

Please note that all GHSA sanctioned sport workouts are voluntary. Student-athletes who elect to participate in conditioning do so on his/her own accord. Coaches will ensure that students practice social distancing at all times, including conditioning, restroom/water breaks, arrival and dismissal.

Recommendations and restrictions are subject to change. Safety is our top priority.

**DISCLAIMER:** Please note, this is not a decision regarding the reopening of schools or the use of DeKalb County School District facilities by the community. Community access to DCSD schools, buildings, and facilities remains restricted until further notice.
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GHSA recommendations for a return to conditioning, as a reference

GHSA Recommendations:

1. All summer work is voluntary.
2. Schools/School Systems may be more restrictive than the GHSA but not less.
3. Workouts are conditioning only, no balls or sport specific equipment.
4. Member schools should prepare an Infectious Disease Prevention Plan prior to staff and athletes returning to conditioning.
5. It is recommended that staff and athletes are screened prior to each workout (see sample monitoring form attached).
6. Signage should be posted on site with the following:
   a. Do you or have you had a fever in the last week?
   b. Have you been diagnosed with COVID-19?
   c. Have you been in contact with anyone diagnosed with COVID-19?
   d. Have you traveled to a “hot spot” for COVID-19?
7. Groups of 20, including coaches, for workouts per sport at any given time at the campus/facility.
8. Groups should be the same individuals (including coaches) for each session to limit risk of exposure. Student or coaches CANNOT change groups for the duration of this guidance.
9. No use of locker rooms or shower facilities. Students should report to the facility dressed to condition and shower at home.
10. Weight equipment should be cleaned prior to each workout and sanitized between use by each student.
11. Hand sanitizer should be plentiful and readily available.
12. Each student should have their own personal water bottle. No use of water fountains or “water cows” is allowed.
13. Side spots only in weight training, safety bars are preferred.
14. Social distancing should be adhered to always and masks/face covering are recommended for the weight room.
15. At least 15 minutes should be scheduled between groups to allow for disinfecting the facility.
16. There is no competition allowed between schools.
17. No visitors are allowed at conditioning sessions.

Recommendations and restrictions are fluid and subject to change. Safety is our top priority.
DCSD REQUIREMENTS for a return to conditioning. **NOTE: DCSD REQUIREMENTS are more restrictive**

**General Hygiene Reminders and Safety Protocols:**

- All summer workouts are voluntary for athletes.
- Hand sanitizer will be plentiful and readily available.
- No sharing of water, snacks or equipment.
- No shaking hands, high fives, fist bump, hugs, etc.
- Groups should be the same individuals (including coaches) for each session to limit risk of exposure. **Student or coaches CANNOT change groups for the duration of Phase 1**
- Signage will be posted at each school site.
- No use of locker rooms or shower facilities.
- Weight equipment should be cleaned prior to each workout and sanitized between uses by each student.
- Student-athletes are required to bring their masks from home.
- Each student should have his or her own personal water and water bottle. No use of water fountains or “water cows” allowed.
- Side spots only in weight training, safety bars are preferred. Spotter must wear a mask.
- Social distancing, 6 feet apart, should be adhered to at all times and masks/face covering are required for the weight room as well as any time the athlete is not actively conditioning.
- At least fifteen minutes should be scheduled between groups to allow for disinfecting the facility.
- There is no competition allowed of any sort. (ex. Padded Camps, 7 on 7)
- No visitors are allowed at conditioning sessions. This includes parents, additional staff, or other stakeholders. Parents and outside exercise groups are not allowed to be on campus at any time during Phase I conditioning.
- No equipment is allowed during the Phase I conditioning Phase (Ex. Balls, Gloves, Bats, Nets, etc.)
- Minimize contact with other teams/sports before, during and after each session
- No player or coach can attend if they are feeling sick.
- Sick players or coaches must quarantine as required by CDC/GA Dept. of Health.
Date Approved for Start of Phase 1 Conditioning:
- June 22, 2020

DCSD Approved Conditioning Schedule:
- Days (Monday-Friday)
- Times
  - 8:00AM-8:45AM
  - 9:00AM-9:45AM
  - 10:00AM-10:45AM
  - 11:00AM-11:45AM**

- Weight Room Training- may only take place on Monday, Wednesday and Friday. *We reserve the right to amend the schedule based upon updated guidelines.*

Sports Approved for Phase 1 Conditioning:
- Varsity Cheer
- Varsity Cross Country
- Varsity Football
- Varsity Softball
- Varsity Volleyball

*JV, Middle School, winter and spring sports are not included in the Return to Conditioning -Phase I.*

Entrance/Exit Strategies:
- Strategies must be developed to prevent groups from gathering at entrances/exits to facilities to limit crossover and contact, including staggering starting/ending times.

Nurses/Athletic Trainers
- Nurses/Athletic Trainers will work daily from 7:30AM- 11:30
- Responsibility will include:
  - Temperature Check
  - Completing GHSA Screening Questionnaire (Appendix C)
  - Completing Screening/Monitoring Form (Appendix D)
  - Log all information and forward to Principal and Department of Athletics

Pre-Workout Screening Procedures:
- Each student-athlete and his/her parent(s)/guardian(s) will sign a COVID-19 waiver form prior to participation in Phase I conditioning.
- All coaches and students will be screened daily for signs / symptoms of COVID -19 prior to participating.
- Students and coaches must arrive on campus at least 30 minutes prior to the scheduled start time, wearing a mask and will report to a predetermined screening station where Nurses/Athletic Trainers will conduct temperature checks and pre-screening forms.
Screening of athletes and coaches will be logged daily, signed, scanned and electronically sent to the athletic liaison.

Anyone with a temperature of greater than 100.4 degrees will not be allowed to participate and will be sent home.

Responses to screening questions for each person will be recorded and stored.

Any person with positive symptoms reported will not be allowed to participate, must self-isolate, and contact their primary care provider or other healthcare professional.

Vulnerable individuals should not oversee or participate in any workouts during Return to Play-Phase 1.

Note: Vulnerable individuals are defined by the Centers for Disease Control and Prevention (CDC) as, “People age 65 and older and others with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune systems are compromised such as by chemotherapy for cancer and other conditions requiring such therapy.”

Positive Prescreening:

✓ Athlete or coach will be informed they can't remain or participate.
✓ Coach will contact parent/guardian, Principal, Athletic Liaison and the Department of Athletics.
✓ Athlete will sit in a designated isolated area until transportation arrives.

Return to Play Protocol Post COVID19 Diagnosis:

✓ Student safety and well-being is vitally important. Those persons who are diagnosed with COVID-19 should present written information confirming clearance from and by a healthcare professional after testing positive and recovering.
✓ Athlete/Coach will only be allowed to return when:
  o symptoms have resolved
  o 14 days have passed
  o a note from a physician clears them of Covid-19
  o a meeting with parent and coach

Mask and Face Coverings:

✓ Coaches and students must bring their own mask
✓ Coaches and student-athletes are strongly encouraged to wear a mask at all times.
✓ Mask must be worn when students are not actively conditioning.
✓ Mask must be worn whenever six feet physical distancing is not possible.
✓ Masks must be worn in the weight room.

Limitations on Gatherings:

✓ Locker rooms are restricted during Phase 1. Students should report to workouts in proper gear and immediately return home to shower at end of the workout.
✓ Workouts must be conducted in “pods” of students with the same groups of students and trainers always working out together. Smaller pods can be utilized for weight training.
There must be a minimum distance of 6 feet between each individual at all times. If not possible indoors, the maximum number of individuals in the room must be decreased until proper social distancing can be achieved.

Facilities Cleaning:
- Adequate cleaning schedules shall be created and implemented for all athletic facilities.
- Prior to an individual or groups of individuals entering a facility, hard surfaces within that facility must be wiped down and sanitized (chairs, furniture in meeting rooms, weight room equipment, bathrooms, athletic training room tables, etc.).
- Individuals shall wash their hands for a minimum of 20 seconds with warm water and soap or hand sanitizer before touching any surfaces or participating in workouts.
- Hand sanitizer will be available to individuals as they transfer from place to place.
- Appropriate clothing/shoes should be worn at all times to minimize sweat from transmitting onto equipment/surfaces. Any equipment such as weight benches, athletic pads, etc. having holes with exposed foam must be covered.
- Students must be encouraged to shower and wash their workout clothing immediately upon returning to home.
- No use of locker rooms or showers.

Shared Equipment:
- Shared equipment should be wiped down thoroughly before and after an individual's use of equipment.
- The weight room area should be cleaned by head coach or designee during the fifteen minute down time between each workout.
- Shared water equipment is prohibited. Athletes will be required to bring their own water bottle.
- Resistance training should be emphasized as body weight, weight machines, and free weights that do not require a spotter.
- Free weight exercises that require a spotter cannot be conducted while honoring physical distancing norms. Safety measures in all forms must be strictly enforced in the weight room.
- There should be no shared athletic equipment (towels, clothing, shoes, or sports specific equipment) between students.

Practice Plans:
- Head Coaches must submit Phase I Conditioning Plans to the school Athletic Liaison/Principal prior to each week of Phase 1 conditioning/weight training.
- Approved practice plans shall remain on file with each school’s Athletic Liaison/Principal.

Monitoring of Phase I Conditioning
- School Administration-Daily
  - Any coach or student who fails to follow the mandated guidelines set forth by GHSA and DCSD will be dismissed from the activity, or the activity will be ended immediately.
✓ Department of Athletics – Personnel will visit programs, at a minimum 2 times per week, on a random basis. School plans will be monitored.

Department of Athletics Required Forms
✓ Every student must have an up to date Physical. (Appendix G)
✓ Every in season head coach must be CPR/AED/FA certified.
✓ Every in season head coach must have completed the Concussion and Sudden Cardiac Arrest training within the last 12 months.
✓ Every in season head coach must complete an Emergency Action Plan (sample template attached).
✓ Every coach must follow GHSA Practice Policy for Heat and Humidity. This guideline requires daily wet bulb readings, daily transport of the AED machine to the area where students are practicing and frequent water breaks. Please see link in (Appendix G)

*Please note this is Phase I of the Return to Conditioning Protocols for fall sports ONLY. Additional guidance will be issued as GHSA and CDC guidelines are updated and are subject to change.
DeKalb County Schools Return to Conditioning Implementation Plan

**Phase I**

*Each school will design a Phase I master plan with the Athletic Liaison, Principal, Assistant Principal over Athletics and Head Coach to indicate the following:*

1. List of sports that will work participate in Phase I strength and conditioning.
2. A roster of each group/pod (limited to 20 people including coaches) that will remain together for the duration of Phase I. *(Appendix A)*
3. A schedule for those groups to use facilities which allows for screening time prior to the practice (At least 30 minutes) as well as cleaning time between each group (At least 15 minutes).
4. A schedule of activities for the first week. *(Appendix B)*
5. A copy of the parent letter to be distributed *(Appendix E).*
6. A signed waiver on file for every student that participates *(Appendix F).*
7. The Head Coach’s plan for sanitizing equipment before, during, and after workouts. (Coaches will be trained on proper cleaning of equipment)
8. Schedule for cleaning the facilities after all parties have left campus for the day (Coordinated with Head Custodian).
9. Location within the building/field where hand sanitizer and spray disinfectants will be located (items will be provided by the District).
10. Distinctive drop-off and pick-up areas. Coaches must supervise athletes at all times.
11. A plan to safely rehydrate student-athletes and follow all heat and humidity guidelines to include wet bulb readings and an AED monitor in the location where students are conditioning. (Note: all water fountains in locations where students are conditioning must be covered)

*This plan must be developed, submitted to the building Principal and kept on file with the local school prior to the commencement of ANY Phase 1 conditioning. Plans will be randomly monitored.*

**Reminder:** All Phase I summer conditioning is strictly voluntary.
Phase 1 Roster of Student/Coaches

School __________________________________________________

Sport _________________________________________________

Head Coach_____________________________________________

POD Number(s) ________________________________________

List of individuals by Pod (up to 20 people TOTAL per pod including coaches):

<table>
<thead>
<tr>
<th>NAME</th>
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Appendix B: Sample Plan

Department of Athletics
COVID Conditioning Sample Implementation Plan

Example Rotation of Groups for Football:

<table>
<thead>
<tr>
<th>WEEK 1</th>
<th>POD/Group 1</th>
<th>POD/Group 2</th>
<th>POD/Group 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:30-8:00AM</td>
<td>Arrive/ Check In</td>
<td>Arrive/ Check In</td>
<td>Arrive/ Check In</td>
</tr>
<tr>
<td></td>
<td>(MUST REMAIN IN DESIGNATED AREA)</td>
<td>(MUST REMAIN IN DESIGNATED AREA)</td>
<td>(MUST REMAIN IN DESIGNATED AREA)</td>
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<tr>
<td>8:00-8:45AM</td>
<td>Warm-up/ Strength and Conditioning</td>
<td>Warm-up/ Strength and Conditioning</td>
<td>Warm-up/ Strength and Conditioning</td>
</tr>
<tr>
<td>8:45-9:00AM</td>
<td>Clean Weight Room</td>
<td>Clean Weight Room</td>
<td>Clean Weight Room</td>
</tr>
<tr>
<td>9:00-9:05</td>
<td>Outgoing Coaches take kids to Blue Parking Lot</td>
<td>Outgoing Coaches take kids to Blue Parking Lot</td>
<td>Outgoing Coaches take kids to Blue Parking Lot</td>
</tr>
<tr>
<td></td>
<td>Incoming Coaches ensure surfaces have been sanitized</td>
<td>Incoming Coaches ensure surfaces have been sanitized</td>
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</table>

**Head Coaches will remain on campus to oversee rotations, troubleshoot, and serve as the direct line of contact to the AD should an emergency arise. (HC will not directly interact with groups other than his own)**
Appendix C: Screening Form

DeKalb County School District

School: ___________________________  Sport: ___________________________
Coach: ___________________________  Date: ___________________________

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Arrival Time</th>
<th>Current Temperature Reading</th>
<th>Fever in last 7 days?</th>
<th>Diagnosed with COVID-19?</th>
<th>Contact with COVID-19 person?</th>
<th>Traveled to COVID hotspot?</th>
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<tbody>
<tr>
<td>John Doe (example)</td>
<td>8:15</td>
<td>97.4</td>
<td>No</td>
<td>No</td>
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Athletes should answer the questions below before being allowed to workout. If the answer is yes to any of the questions below, the athlete should not participate in any workouts for a 14-day period.

GHSA Workout Questionnaire

- Athletes should answer the questions below before being allowed to workout. If the answer is yes to any of the questions below, the athlete should not participate in any workouts for a 14-day period.

  - Do you or have you had a fever in the last week?
  
  - Have you been diagnosed with COVID 19?
  
  - Have you been in contact with anyone diagnosed with COVID 19?
  
  - Have you traveled to a “hot spot” for COVID 19?
## Appendix D: Monitoring Form

### DCSD Department of Athletics
### COVID-19 Coach/Athlete Monitoring Form

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<th>School___________________________</th>
<th>Sport_______</th>
<th>Date___________</th>
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<tr>
<th>Name</th>
<th>Fever</th>
<th>Cough</th>
<th>Sore Throat</th>
<th>Short of Breath</th>
<th>Recent loss of Taste and Smell</th>
<th>Close contact with COVID Patient</th>
<th>Temp.</th>
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<tr>
<td>Yes</td>
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Person Completing This Form______________  Signature ________________
ATTENTION

If you have

Fever, cough, sore throat, shortness of breath, difficulty breathing, chills headache, muscle pain, new loss of taste or smell

or

you have had contact with a confirmed COVID 19 patient

Put a mask on and alert the coach/staff immediately
Appendix E: Sample Parent Letter

Department of Athletics
Sample Parent Letter
(Place on School Letterhead)

Dear Parent/Guardian,

The DeKalb County School District will allow student-athletes participating in fall sports to voluntarily return to activity on June 22, 2020. In accordance with GHSA guidelines, our plan is restrictive and will only allow students to participate in conditioning and weight lifting. Students will not have access to any balls, bats or sport specific equipment. Please know that activities are strictly voluntary.

The District is committed to making every effort to follow the recommendations and restrictions included in the guidance provided by the GA Department of Health and the CDC. We have put preventative measures in place to reduce the spread of COVID-19 to include but not be limited to: requiring a mask for all students and coaches; providing hand sanitizer throughout the campus, placement of signage to encourage social distancing and a planned pre-screening of every student-athlete/coach, every day.

To assist in a safe return to conditioning we ask all parents to ensure your child:
- Has no signs of COVID-19 for past 14 days and no known exposure before sending him or her to training.
- Wears a face mask during training.
- Sanitize and wash all equipment and uniforms after training
- Pack hand sanitizer and a face mask in his or her bag.
- Comply with social distancing and face mask directives.
- Bring at least 4 bottles of water per day and do not share water, snacks or equipment.

Parent, you make the ultimate decision regarding your child's participation. Please know that if you have any reservations about conditioning and reintegrating, your child is NOT required to participate and non-participation will not be held against him/her.

Our goal is to keep everyone safe as we transition back into sports. Thank you in advance for your support and if you have any questions, please contact XXXXXX at XXXXX.
Appendix F: Waiver

DEKALB COUNTY SCHOOL DISTRICT
SUMMER 2020 RETURN TO PARTICIPATION
Release of Liability and Waiver

PLEASE READ ENTIRELY BEFORE SIGNING

Student participation in athletic and extracurricular activities is a privilege afforded to students by the DeKalb County School District (District). As a condition of your Student’s participation in District extracurricular and athletic programming, including summer practice and/or conditioning programs, parent/guardian must sign the following release. Please understand that Student’s participation in athletic and extracurricular activities and events during the summer or regular school year is entirely voluntary, as is your execution of the below waiver. Signature of this form is required to allow for Student participation.

IN CONSIDERATION OF ______________________________________________(Student) being allowed to participate in the DeKalb County School District’s Summer 2020 athletics and/or extracurricular programs and related events and activities, the undersigned acknowledges and agrees to the following:

I understand that the risks of injury and illness (ex: communicable diseases, such as influenza, tuberculosis, pneumonia, hepatitis and COVID-19) to Student from the activities involved in these programs are significant. Further, Student may sustain physical injury or illness (minimal, serious or catastrophic) in connection with his/her participation and interaction with other students, including the potential for permanent disability and death. While safety rules, equipment, and hygiene may reduce these risks, the risks of serious injury and illness cannot be eliminated. The risk to have contact with individuals, who have been exposed to, who are currently infected with or who have been diagnosed with one or more communicable diseases, including but not limited to COVID-19, other medical conditions, diseases, or infections does exist. It is impossible to eliminate the risk that Student could be exposed to and/or become infected through contact with or close proximity with an individual with a communicable disease if he/she elects to participate in District athletic or extracurricular activities and events. In addition to the risk of infection posed to Student by possible infection, this may put others that Student has close contact with at risk of infection. I understand that if Student, Student’s family or household members have underlying health conditions or a compromised immune system, they may be more susceptible to risk of infection and/or illness, including COVID-19, and I have carefully considered these risks and consulted as appropriate with a licensed healthcare provider prior to making any decision regarding Student’s voluntary participation in athletic or extracurricular activities.

Therefore:

1. I, for myself and on behalf of Student and Student’s parents, guardians, heirs, executors, administrators, assigns and next of kin, knowingly and freely acknowledge and assume all such risks, both known and unknown, and full responsibility for Student’s participation; and

2. I, for myself and on behalf of Student and Student’s parents, guardians, heirs, executors, administrators, assigns and next of kin, hereby release, discharge, indemnify, and agree to hold harmless the DeKalb County School District (DCSD), Members of the DCSD Board of Education, its past, present and future officers, attorneys, agents, employees, predecessors and successors in interest, and assigns, hereinafter “DCSD releasees”, from any and all liability arising out of or in connection with Student’s participation in athletic and extracurricular activities and related events. For purpose of this Release, liability means all claims, demands, losses, causes of action, suits, or judgments of any kind that Student and Student’s parents, guardians, heirs, executors, administrators, assigns and next of kin have or may have against the DCSD releasees because of Student’s personal, physical, or emotional injury, accident, illness or death, or because of any loss of or damage to property that occurs to
Student or Student’s property during participation in athletic and extracurricular activities and related events due to acts of passive or active negligence by DCSD releases other than actions involving fraud or actual malice.

3. I, for myself and on behalf of Student and Student’s parents, guardians, heirs, executors, administrators, assigns and next of kin, assume all liability and responsibility for any and all potential or real risks, injuries or even death which may result from Student’s participation in athletic and extracurricular activities and related events. I represent and warrant that I know of no mental or physical condition or illness, including symptoms, infection or known exposure of Student to COVID-19 or other communicable disease, that would make it unsafe for Student to participate in interscholastic athletics, sports teams/clubs and events, whether based upon risk to Student or other participants. I understand, acknowledge, and agree that the DCSD School District shall not be liable for any injury/illness suffered by the Student or another individual which arises out of and/or is associated with Student’s participation in athletic and extracurricular activities and related events.

4. I further understand that the District has established rules and regulations pertaining to conduct, behavior, activities, health/hygiene and the safety/wellbeing of all students by which my child must abide during participation in this program. These include rules to mitigate the risk of spread of communicable disease, including but not limited to COVID-19. Student and I accept the risk and will be responsible for his/her failure to abide by these rules.

5. I willingly agree to comply with the program’s stated and customary terms and conditions for participation. If I observe any unusual concern regarding my child’s wellness and fitness for participation whether mental or physical, I will immediately remove my child from participation and bring to attention of a coach, District staff or nearest official immediately. This requirement includes immediate notice and removal of Student from athletic and/or extracurricular participation due to any COVID-19 (or other communicable disease) symptoms, confirmed or suspected infection and confirmed or suspected exposure; and

6. I, the parent/guardian, assert that I have explained to Student: the risks of the activity, his/her responsibilities for adhering to the rules and regulations, the importance of health-safety guidelines to mitigate the risk of spread of COVID-19 or other communicable disease, and that Student understands and agrees to abide by this agreement.

By signing below, Parent/Guardian and Student hereby grant permission for Student’s participation in Summer 2020 Athletic and/or Extracurricular Activities and Events for DeKalb County School District. Signing below indicates acknowledgement that Undersigned and Student have carefully reviewed and agree to all above terms of athletic participation, including voluntary waiver, release and assumption of risk, fully understand its terms, along with the risk, and acknowledge that it has been signed freely, voluntarily and without inducement.

Name of Student (Printed):_________________________________________________________

Name of Parent/Guardian (Printed):___________________________________________________

Parent/Guardian Signature:_________________________________________________________

Student Signature:________________________________________________________________

Date Signed: ____________________________________________________________________
Appendix G: Athletics Forms

DeKalb Athletics GHSA Links for 2020

A. Begin and End Dates:
https://www.ghsa.net/beginning-and-ending-dates

B. Constitution and By-Laws
https://www.ghsa.net/constitution

C. GHSA Physical Form

D. Emergency Medical Card

E. Concussion Management
https://www.ghsa.net/concussion-management-high-school-athletics

F. Concussion Form

G. Emergency Action Plan
http://www.anyonecansavealife.org/

H. Heat Policy
https://www.ghsa.net/practice-policy-heat-and-humidity
https://www.ghsa.net/5-tips-help-athletes-stay-safe-intense-heat

I. Sudden Cardiac Arrest Form
https://www.ghsa.net/sites/default/files/documents/sports-medicine/Sudden_Cardiac_Arrest_Awareness_Form.pdf

J. Lightning and Inclement Weather

K. Sports Medicine South 3D Injury Guide

L. Sports Medicine Websites
https://www.ghsa.net/sports-medicine-websites

M. Nutrition and Training
https://www.ghsa.net/putting-extra-mile-or-rep

N. GHSA Forms
https://www.ghsa.net/forms

O. Lay Coaches Certification
https://www.ghsa.net/lay-coach-certification

P. DeKalb Athletic Forms
https://www.dekalbschoolsga.org/athletics/downloads/

Q. Defensive Football Stats
https://www.dekalbschoolsga.org/athletics/files/2016/03/FOOTBALL-DEFENSE.pdf

R. Offensive Football Stats
https://www.dekalbschoolsga.org/athletics/files/2016/03/FOOTBALL-OFFENSE.pdf

S. Football Roster
https://www.dekalbschoolsga.org/athletics/files/2014/06/FOOTBALL-ROSTER.pdf
Appendix H: Sample EAP

EMERGENCY ACTION PLAN
FOOTBALL

ARABIA MOUNTAIN HIGH SCHOOL
6610 Browns Mill Rd, Lithonia, GA 30038

The highest person in the chain of command who is present at the scene will be the designated person and decide whether to call 911.

EMERGENCY EQUIPMENT
- Basic First Aid Kit: Located in coach’s office on the 2nd floor room 709 (splints, cervical collar, ace bandage crutches)
- AED Machine: Located in Main Office and back wall on the left side of gym.
- Ice Machine: Located in back of concession stand

EMERGENCY CONTACT NUMBERS
Ambulance, Fire Police: 911
404-404-4040
404-404-4041
404-404-4042
404-404-4043
404-404-4044

ROLE OF FIRST RESPONDERS
1) Emergency equipment retrieval
2) Call 911 (provide name, address, telephone number; number of individuals injured; condition of injured; first aid treatment; specific directions; location of school; other information as requested)
3) Notify parents as soon as possible and obtain consent if transport is necessary
4) Designate one to two people to "flag down" EMS and direct to scene.
5) Scene control: limit scene to first aid providers

CHAIN OF COMMAND
- Athletic Trainer: John Doe
- SRO: Officer Frank Doe
- Principal: James Doe
- Athletic Director: Jane Doe
- Head Coach: Janet Doe
- Assistant Coach: Moe Doe

BASIC EMERGENCY CARE
If unconscious: Call 911 immediately
If in doubt: Call 911 immediately

Apply basic first aid as situation requires
- Adult CPR: 30 compressions for every 2 breaths (slow, don’t force)
- Bleeding: direct pressure over injury; elevate injury over heart if possible; apply sterile dressing over injury
- Sprains and Fractures: Immobilize student and wrap area
- Cervical Collar: apply if suspected neck injury; prevent any movement of neck when applying cervical collar

DeKalb County School District Athletics
Appendix I: Compliance Form

Compliance Statement

My signature indicates that I have had an opportunity to read and ask questions concerning the DCSD COVID-19 Return to Conditioning Handbook. I understand what is expected of me and know that I must follow these guidelines in order to participate.

Coach Name ___________________________ Signature ___________________________

Sport ___________________________ Date____________________________

Principal/AD Name_________________________ Principal/AD Signature ___________________________

Date__________________________