



# Stafford County Public Schools

## Athletics and Activities Code of Conduct

### Marching Band Signature Packet

The following Stafford County Public Schools' documents are attached:

- Athletics and Activities Code of Conduct Student Statement of Understanding
- Athletics and Activities Code of Conduct Parent/Guardian Statement of Understanding
- Marching Band Heat and Hydration Statement of Understanding
- Marching Band Concussion/Brain Injury History
- Marching Band Medical and Emergency Contact Information

All of the documents listed above must be signed and returned to the Band Director.

The Athletics and Activities Code of Conduct provides detailed information concerning the expectations of our coaches, sponsors, band directors, student-athletes, students, and parents/guardians. This document will be reviewed during the Parent/Athlete Information Nights, Band Parent Information Nights and kick-off meetings with students involved in club activities by middle school athletic directors, high school Assistant Principals of Athletics and Activities, Coordinator of Fine and Performing Arts, sponsors, head coaches, band directors.

This document can be found on [www.forgepride.com/forms](http://www.forgepride.com/forms) page. Please take the time to review the entire document, specifically the pages listed on the Code of Conduct Statement of Understanding page requiring your signature.

If a hard copy of this document is preferred, copies are available at every middle and high school or in the main lobby of the Stafford County Public Schools Alvin York Bandy Administrative Complex located at 31 Stafford Avenue, Stafford, VA 22554.

Any questions can be directed to the high school Band Director or the high school Assistant Principal of Athletics and Activities.



**STAFFORD COUNTY PUBLIC SCHOOLS**  
**ATHLETICS AND ACTIVITIES STATEMENT OF UNDERSTANDING**  
**STUDENT**

Students should review the following, **initialing** each statement and signing at the bottom.

\_\_\_ I have received and reviewed the Athletics and Activities Code of Conduct and the Stafford County Public Schools Code of Conduct (Policy 240 I) and agree to meet expectations outlined within.

\_\_\_ I accept that I have a responsibility to represent my school and community in a positive manner and will conduct myself with honesty, integrity, and respect for others at all times.

\_\_\_ I understand that I must be in attendance at school in order to practice, compete, or participate in athletics or extracurricular activities and will provide written notice, signed by my parent/guardian, when I need to miss practice, meeting, or any event.

\_\_\_ I agree to follow all expectations outlined in the Athletics and Activities Code of Conduct as well as the Stafford County Public Schools' Student Code of Conduct.

\_\_\_ I will not engage in and will not be tolerant of violent acts, including assaults on persons or property, abusive language, harassment, hazing, stalking, sexual violence, or any other conduct prohibited by law. If I witness such acts perpetrated by others, I will report them to my coach, sponsor, or administrator.

\_\_\_ I will not engage in any act, including via social media, that subjects another person, voluntarily or involuntarily, to abuse, mistreatment, humiliation, harassment, or intimidation. If I witness such acts perpetrated by others, I will report them to my coach, sponsor, or administrator.

\_\_\_ I will not consume or use alcoholic beverages, energy drinks, dietary supplements, anabolic steroids, tobacco, or illegal drugs.

\_\_\_ I will follow all locker room rules and meet locker room behavioral expectations at all times.

\_\_\_ If I observe a fellow student in distress of any kind, I will notify a coach or activity sponsor immediately.

\_\_\_ I understand that failure to conduct myself responsibly, as stated and implied in the Athletics and Activities Code of Conduct, Stafford County Public Schools' Student Code of Conduct, and in the above statements, may result in sanctions, ranging from limited participation up to and including suspension or dismissal from the team, and suspension or expulsion from Stafford County Public Schools.

Colonial Forge High School	Marching Band	
School	Grade	Activity

Student Name – Print	Student Signature	Date
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Parent/Guardian Name – Print	Signature	Date
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Please sign and return with other required documents



STAFFORD COUNTY PUBLIC SCHOOLS

ATHLETICS AND ACTIVITIES STATEMENT OF UNDERSTANDING

PARENT/GUARDIAN

After reading and reviewing the sections pertaining to your child's level of participation in extracurricular activities offered by Stafford County Public Schools, please indicate your understanding by **initialing** the statements below.

In effect during all extracurricular activities are the Stafford County Public Schools' Student Code of Conduct

(Policy 2403), Extra/Co-Curricular Participation (Policy 3502), and Related Notices, rules, expectations, and requirements.

\_\_\_\_ I received a copy of the Stafford County Public Schools' Athletics and Activities Code of Conduct.

\_\_\_\_ I read and agree to the sections pertaining to my level of participation, including guidelines and expectations, in Stafford County athletics and activities.

\_\_\_\_ I will follow all protocols associated with my participation in SCPS athletics and activities.

\_\_\_\_ I acknowledge that Stafford County Public Schools has informed me that supplemental accident insurance is available from a third party carrier to cover my child.

\_\_\_\_ I understand my child must submit completed Student Statement of Understanding and Parent Statement of Understanding forms at least one day prior to the first contest in order to participate.

\_\_\_\_ I realize that by not following proper behavior requirements while attending an athletic/activity event, I may be removed from that activity and possibly the remainder of the events associated with that sport or activity.

\_\_\_\_ I agree to be a positive supporter of my child's participation in athletics/activities. I agree to allow coaches to coach and sponsors to lead.

If I have a question or concern, I will communicate in the following sequence: coach or sponsor, assistant principal for athletics and activities or middle school athletic director, building principal, and lastly central office contacts listed in this document.

Colonial Forge High School \_\_\_\_\_ Marching Band  
School Grade Activity

\_\_\_\_\_  
Student Name (Print)

\_\_\_\_\_  
Parent/Guardian Name (Print) Parent/Guardian Signature Date

Please sign and return with other required documents