



**Horizon School Division
Policy HICA Attachment C3**

**Principal Approval: Extra-Curricular Sports
(Horizon Jr. High Athletics/ASAA sports) Approval Form**

- This form is being completed for on-site and off-site activities
 - On-site is defined as activities that take place in the school or on school grounds
 - Off-site is defined as activities that take place off school property (e.g. other third party locations, or other schools)

Individual(s) requesting approval:	For school year: _____
------------------------------------	-------------------------------

Grade level of physical education class (please circle)

6 7 8 9 10 11 12

Proposed AMBER activities (check all that apply)

<input type="checkbox"/> Football	<input type="checkbox"/> Discus	<input type="checkbox"/> Triple Jump,
<input type="checkbox"/> Rugby	<input type="checkbox"/> High Jump	<input type="checkbox"/> Long Jump
<input type="checkbox"/> Softball	<input type="checkbox"/> Hurdles	<input type="checkbox"/> Weightlifting
<input type="checkbox"/> Track and Field (specify activities)	<input type="checkbox"/> Javelin	<input type="checkbox"/> Wrestling
	<input type="checkbox"/> Shot put	

I have reviewed and considered Horizon policies (check all that have been reviewed and considered)

<input type="checkbox"/> EEACAA – Private vehicles volunteer	<input type="checkbox"/> GFA – Volunteers
<input type="checkbox"/> EEACAB – Division owned co-curricular activity vehicles	<input type="checkbox"/> HICA – Off-site activities
<input type="checkbox"/> GBD – First aid training	<input type="checkbox"/> IHCD – Concussion
	<input type="checkbox"/> IHCE – Student illness/injury

I have reviewed and considered all Need-to-know information relevant for all activities checked off (pg. 11-17 in "Safety Guidelines for Physical Activity in Alberta Schools 2013")

Yes

No (If No, explain)

I have reviewed and considered Need-to-Know information for all applicable activity categories. (check activities categories that have been reviewed and considered).

- Indoor Activities (pg. 19-20)
- Outdoor Activities (pg. 23-24)
- Gymnastics Activities (pg. 21-22)
- Off-site Activities (pg. 33-35).
-

I have reviewed and considered guidelines for all specific activities checked off. (pg. 37-143 in "Safety Guidelines for Physical Activity in Alberta Schools 2013")

- Yes
- No (If No, explain)

I have reviewed, considered, and will be implementing all safe instructional practices and guidelines that I have been reviewed in the above policies and resource

- Yes
- No (If no, explain)

All activities are implemented at an age-appropriate level.

- Yes
- No (If no, explain)

List the activities you have not taught in the last two years

I am familiar with, have reviewed, and will be implementing all ASAA requirements (for gr. 10-12 extra-curricular activities only)

- Yes: _____

No/NA (If no/NA, explain)

I have current certified First Aid/C.P.R. certificate I have current certified First Aid/C.P.R. certificate (Note someone with first aid needs to be present when doing amber activities. (this could be: another staff member in the school when the activity is on-site / the supervising teacher or another adult (e.g. lifeguard) when off-site)

Yes

Expiration date: _____

No, (explain who/how first aid will be addressed): _____

Teacher/Adult Signature: _____ Date: _____

Principal Comments (e.g. additional safety precautions or directions): _____

Principal Name: _____

Principal Signature: _____ Date: _____
(indicating approval)

Principals should keep a copy of this approval form at the school for

- One (1) year beyond the end of the school year approved.
- Five (5) years if an accident report was filed during one of the activities.