Everett School District No. 2

SWIMMING SAFETY GUIDELINES High School

This school strives to protect each student from possible injury while engaging in school activities. The guidelines and/or practices identified below have been established for this activity in order to protect the student and others from injury and/or illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and well fitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach.

Travel to and from off-campus facilities shall be in accordance with the directions of the activity coach.

Guidelines are as follows:

- 1. Make certain that you wear all equipment that is issued by the coach. Advise the coach of any poorly fitted or defective equipment.
- 2. Advise the coach if you are ill or have any prolonged symptoms of illness.
- 3. Advise the coach if you have been injured.
- 4. Engage in warm-up activities prior to strenuous participation.
- 5. Be alert of any physical hazards in the locker room or in or around the participation area. Advise coach of any hazard.
- 6. Know the location of rescue equipment in the pool area.
- 7. Never enter the water without the coach (or the designated lifeguard) in pool area.
- 8. Check for clear water before diving; and when diving off the blocks, make it a shallow dive. Only divers who have been taught basic diving skills and are under the supervision of a coach will be permitted to dive.
- 9. Do not run while on the pool deck.

The above information has been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the swimming program.

| I am aware that diving is a high-risk activity involving many risks of injuring many risks. | | at practicing or | competing in diving | g will be a da | ingerous |
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| | | Date: | | | |
| Athlete's Signature | | | | | |
| | | Date: | | | |
| Parent or Guardian's Signature | | | | | II:ah Cahaal |
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| Please print Name: | | Studer | nt ID | | |
| Office use only: | | | | | |
| Emergency/Physical: | Yes | No \square | Academics: | Yes | No \square |
| Eligibility/Parent Permission/Athl Code: | Yes | No \square | ASB Card | Yes | No \square |