



CODE OF CONDUCT

I have received and read the Athletic Code of Conduct related to eligibility for Crater High School. I do understand and will follow the rules, regulations, and expectations described therein.

This contract will be honored yearly from the signature date.

Parent/Guardian Signature

Date

Print Name _____

Student Signature

Date

Print Name _____

SAFE SPORTS SCHOOL

I have reviewed the informational material provided on the Sports Medicine page of the Crater Athletics website regarding sudden cardiac arrest, concussion management, heat and cold illness, nutrition and risk of sports related illness.

www.athletics.cratercomets.com

Parent/Guardian Initials