

CC Parents Meeting Agenda  
Tuesday May 28, 2024  
5:00 pm



- I. Welcome
- II. Introduce Coaching Staff
  1. Coach Timpa
  2. Coach Roginski
  3. Coach Nick Bryant
  4. Coach Missy Timpa
- III. Expectations
  - A. Athlete conduct
    1. Hazing –not tolerated
    2. Cyber bullying-not tolerated /Bullying-not tolerated
    3. Athletes should inform an adult
    4. Public Act 31—any person who uses or knowingly possesses androgenic anabolic steroids violates MI law and is punishable by imprisonment and fine.
  - B. Academic Eligibility
    1. Weekly progress reports
    2. <https://lhh.tutor.com/default.aspx?ProgramGUID=0b454265-cc05-4195-b5dd-8b8698372ba8&InterfaceId=2&InterfaceType=InterfaceType=K12#>
    3. Ask teammate or NHS member or a coach for help.
    4. NCAA eligibility
  - C. Athletic
    1. Dedication
      - a. Stugo / Jobs / other clubs
    2. Summer training-250 mile running club, 375, 500, 625, 750 (tee shirts)
    3. Log your training—online Garmin connect, Strava or in a journal
    4. Attitude *← get a free t-shirt*
    5. Away Meets
      - a. Athletes are required by District and coaches to ride to and from the meet on the bus
      - b. Must clean up our area
    6. Volunteerism
      - a. Craft Show-November
      - b. Dakota Carnival of Races (Oct. 3<sup>rd</sup>)
      - c. Run Fast Invite @ Dakota (Oct. 29<sup>th</sup>)
      - d. Team dinners- at school, house, etc. *← pick a date and email Coach Timpa*
    7. Practices (2:30 to 4:30 daily) \*Wednesday's 3:15-5:00
      - a. lockers in the school
      - b. **be on time**, practice hard until excused by your coach
      - c. Inclement weather /heat index/indoor practice
    8. Diet –Proper Nutrition is vital



- a. **Limit pop and fast food**, drink water, water, water
- b. eat carbohydrates, drink water
- c. iron rich foods, but not too much
- d. protein /chocolate milk

### III. Important Dates

1. **CC Camp Aug 16-23-Register by Aug 2** <https://www.payschoolsevents.com/>
2. August 12<sup>th</sup> Practice begins
3. Physicals due Aug 2<sup>nd</sup>
4. Team Pictures -TBD
5. All County Banquet Nov. 12<sup>th</sup>
6. Awards Banquet Nov. 25<sup>th</sup>
7. Dates will be similar for 2025, plan accordingly...

*see flyer*  
*complete attached form signed/dated by a doctor.*  
*upload to planeths.com (see directors)*

### IV. Business

1. Uniforms /uniform request forms
2. Practice Jersey
3. Metro Park Passes-Daily is \$10 –Annual is \$40
4. Cross Country Merchandise nothing is required  
<https://stores.inksoft.com/dakotaxc/shop/home>
5. Shoes and Spikes (Hanson's Running Shop-10% off)
6. **Watches-required for daily practice**
7. Pants, shorts, windbreaker, rain gear / cold and warm
8. Fundraisers – volunteer at concession during the school year go to  
<http://www.dhsboosters.com/>
9. Other business

### V. Forms

1. Personal Info <https://goo.gl/forms/sO5WKJquZ6r5dCmx1>
2. [www.Planeths.com](http://www.Planeths.com)
3. Physical-**have iron levels checked.**
4. Athletic Fee-will be assigned when we submit our roster.
5. Concussion Testing (SWAY) is no longer required for XC athletes.

### VI State Finals /Shepherd

1. Possible overnight to shepherd -
2. State finals-will stay overnight-course preview, etc.

### VII Cross Country Camp details

1. Dates (August 16<sup>th</sup>-23<sup>rd</sup>)
2. Bambi Lake, Roscommon, MI
3. Schedule
4. Food- special diets — **LET US KNOW ASAP!**



VII. Risks in athletics

- A. Safety first-rule of the road running on the left side, groups,  
**No ear buds**, know your surroundings.
- B. Team AED for meets and remote locations (camp)
- C. Possibility of injury or even death
- D. INJURY
  1. Report to coaches and parents right away.
  2. We are not doctors...go to an athletic doctor.
  3. Come to practice, even if you are not running
  4. We have bikes, ice bath, core work, weight room, elliptical, etc.

VIII. Contact Information

A. Remind.com TEXT @dhsbxc (Boys) or @dgxc (Girls) to 81010

B. Coach Timpa [mtimpa@cvs.k12.mi.us](mailto:mtimpa@cvs.k12.mi.us)  
Work 723-2938  
Room 200

*↑ sign up for one!!*

C. Coach Roginski [eroginski@cvs.k12.mi.us](mailto:eroginski@cvs.k12.mi.us)  
Work 723-2992  
Room 240

D. Websites: [www.dhscc.weebly.com](http://www.dhscc.weebly.com)  
[www.dakotaathletics.com](http://www.dakotaathletics.com)

<https://www.athletic.net/CrossCountry/School.asDakotaxc4life!px?SchoolID=12926>

Cougars  
»CC«





# 2024 DAKOTA COUGARS CROSS COUNTRY

## COACH TIMPA / COACH ROGINSKI

### MAC RED DIVISION

[www.dhscc.weebly.com](http://www.dhscc.weebly.com)



DAKOTA  
EISENHOWER

GROSSE POINTE NORTH  
FRASER

ST. CLAIR  
ROMEO

ANCHOR BAY  
UTICA

Men run 1<sup>st</sup> in 2024

| <u>Day</u> | <u>Month</u> | <u>Date</u> | <u>Event</u>                                       | <u>Time</u>    | <u>Bus</u>    |
|------------|--------------|-------------|--|----------------|---------------|
|            | Fri-Fri      | Aug 16-23   | DHS XC CAMP @ Bambi Lake, Roscommon, MI            |                |               |
| Thu        | Aug          | 13          | Birch Run Early Invitational @ Taymouth Twp. Park  | 4:30/5:15 PM   | From camp     |
| Wed        | Aug          | 28          | Early Bird Invitational @ Lake St. Clair Metropark | 4:30/5:00 PM   | 2:00 PM       |
| Wed        | Sept         | 4           | MAC RED JAMBOREE @ Stony Creek Eastwood Beach      | 5:00/5:45 PM   | 2:45/3:30 PM  |
| Sat        | Sept         | 7           | MUSKRAT CLASSIC RUN (HS & MS) @ Algonac HS         | 9:30/10:30 AM  | 7:15/ 8:15 AM |
| Sat        | Sept         | 14          | HURON INVITE @ Willow Metropark Chestnut Grove     | 9:05/10:10 AM  | 6:00/ 7:00 AM |
| Fri        | Sept         | 20          | JAMES CLEVERLEY INVITE (HS & MS) @ Anchor Bay HS   | 4:00/4:30 PM   | 2:15/2:45 PM  |
| Sat        | Sept         | 21          | JACKSON INVITATIONAL @ Ella Sharp Park             | 9:00/9:40 AM   | 6:00 AM       |
| Wed        | Sept         | 25          | MAC RED DIVISION MEET @ tbd                        | 5:00/5:45 PM   | 2:45/3:30 PM  |
| Sat        | Sept         | 28          | BLUEJAY INVITATIONAL @ Shepherd HS                 | 9:30/10:30 AM  | 6:00 AM       |
| Thu        | Oct          | 3           | COUGARS XC CARNIVAL (HS & MS) @ Dakota HS          | 4:15/4:45 PM   | -----         |
| Sat        | Oct          | 12          | MACOMB COUNTY MEET @ Stony Creek Eastwood Beach    | 10:00/10:30 AM | 7:45/8:15 AM  |
| Sat        | Oct          | 26          | MHSAA DIVISION 1 REGIONAL @ tbd                    |                |               |
| Tue        | Oct          | 29          | RUN FAST INVITE @ Dakota HS                        | 4:00/4:20 PM   | ----- (G)     |
| Sat        | Nov          | 2           | MHSAA DIVISION 1 STATE FINALS @ M.I.S.             | 2:10/3:30 PM   | 10:00 AM (G)  |
| Tue        | Nov          | 12          | ALL COUNTY BANQUET @ Zuccaro's (46601 Gratiot)     | 6:00 PM        | -----         |
| Mon        | Nov          | 25          | TEAM AWARDS BANQUET @ Zuccaro's (46601 Gratiot)    | 6:00 PM        | -----         |

Coach Timpa, [mtimpa@cvs.k12.mi.us](mailto:mtimpa@cvs.k12.mi.us)

Men's Remind: TEXT 81010 type @dhsbxc in the message

Coach Roginski, [eroginski@cvs.k12.mi.us](mailto:eroginski@cvs.k12.mi.us)

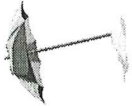

Women's Remind: TEXT 81010 type @dgxc in the message

# June 2024

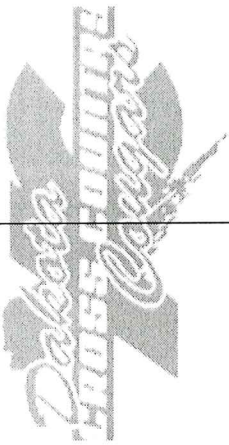



| Sunday   | Monday  | Tuesday  | Wednesday   | Thursday  | Friday  | Saturday   |
|--|---|--|---|---|---|--|
| 26   | 27  | 28   | 29  | 30  | 31  | 1  |
|  | <b>NO SCHOOL</b><br>Memorial Day  | <b>Preseason Meeting</b><br>5:00 pm<br><b>DHS Community</b>                                | CC Conditioning 2:30<br>@ DHS Stadium   | CC Conditioning 2:30<br>@ DHS Stadium                               | CC Conditioning 2:30<br>@ DHS Stadium   | <b>TRACK &amp; FIELD</b><br><b>STATE FINALS</b>  |
| 2  | 3   | 4  | 5   | 6   | 7   | 8  |
|  | CC Conditioning 2:30<br>@ DHS Stadium   | CC Conditioning 2:30<br>@ DHS Stadium  | CC Conditioning 2:30<br>@ DHS Stadium   | CC Conditioning 2:30<br>@ DHS Stadium                               | ½ Day- Exams<br>CC Conditioning<br>10:45 am @ between<br>NGC & 10/12 building         | <b>OPTIONAL</b><br><b>CONDITIONING</b><br>9 am - Meet between<br>NGC and 10/12<br>building     |
| 9  | 10  | 11   | 12  | 13  | 14  | 15   |
| <b>OPTIONAL</b><br><b>CONDITIONING</b><br>9 am - Meet between<br>NGC and 10/12<br>building | ½ Day- Exams<br>CC Conditioning<br>10:45 am @ between<br>NGC & 10/12 building<br><b>*T&amp;F Awards 5pm</b>         | ½ Day- Exams<br>CC Conditioning<br>10:45 am @ between<br>NGC & 10/12 building              | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building               | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>AM Pool</b> | <b>OPTIONAL</b><br><b>CONDITIONING</b><br>9 am - Meet between<br>NGC and 10/12<br>building     |
| 16   | 17  | 18   | 19  | 20  | 21  | 22   |
| <b>OPTIONAL</b><br><b>CONDITIONING</b><br>9 am - Meet between<br>NGC and 10/12<br>building | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building   | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>Pool 4:00 pm</b> | CC Conditioning<br>8 am - Meet near<br>Splashpad the Clinton<br>Twp. Civic Center | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>AM Pool</b> | <b>OPTIONAL</b><br><b>CONDITIONING</b><br>9 am - Meet between<br>NGC and 10/12<br>building     |
| 23   | 24  | 25   | 26  | 27  | 28  | 29   |
| <b>OPTIONAL</b><br><b>CONDITIONING</b><br>9 am - Meet between<br>NGC and 10/12<br>building | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>HANSONS SHOE</b><br><b>NIGHT! 6 - 8PM</b> | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>Pool 4:00 pm</b> | CC Conditioning<br>8 am - Meet near<br>Splashpad the Clinton<br>Twp. Civic Center | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>AM Pool</b> | <b>RUN THE PLANK 5K</b><br>Cost \$35 includes past<br>dinner, race, pizza<br>after Time 8:15am |

# July 2024

| Sunday  | Monday  | Tuesday  | Wednesday  | Thursday   | Friday   | Saturday   |
|---|---|--|--|--|--|--|
|    | 1   | 2  | 3  | 4  | 5  | 6  |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <p style="text-align: center;"><b>SUMMER</b></p> </div> <div style="width: 30%;"> <p style="text-align: center;"><b>DEAD</b></p> </div> <div style="width: 30%;"> <p style="text-align: center;"><b>PERIOD</b></p> </div> </div> |   |  |  |  |  |  |
| 7   | 8   | 9  | 10   | 11   | 12   | 13   |
| OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12<br>building  | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>PM Pool - 4:00 pm</b> | CC Conditioning<br>8 am - Meet @<br>Splashpad Clinton<br>Twp. Civic Center<br><b>PM Pool - 4:00 pm</b> | CC Conditioning<br>8 am-Meet @<br>Splashpad Clinton<br>Twp. Civic Center | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building                | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>AM Pool</b>                      | OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12<br>building |
| 14  | 15  | 16   | 17   | 18   | 19   | 20   |
| OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12<br>building  | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building                             | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>PM Pool - 4:00 pm</b>        | CC Conditioning<br>8 am-Meet @<br>Splashpad Clinton<br>Twp. Civic Center | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building                | CC Conditioning 8am<br><b>AM Pool</b><br>Hanson's XC meet @<br>Stony Creek Oakgrove<br>7PM Register online | OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12<br>building |
| 21  | 22  | 23   | 24   | 25   | 26   | 27   |
| OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12<br>building  | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building                             | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>PM Pool - 4:00 pm</b>        | CC Conditioning<br>8 am-Meet @<br>Splashpad Clinton<br>Twp. Civic Center | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building                | CC Conditioning 8am<br>Hanson's XC meet @<br>Riverbends 7PM<br>Register online<br><b>AM Pool</b>           | <b>Sterling Fast 5K \$25</b><br><b>@ Dodge Park</b><br><b>9:00 AM</b>        |
| 28  | 29  | 30   | 31   |  |  |  |
| OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12<br>building  | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building                             | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12<br>building<br><b>PM Pool - 4:00 pm</b>        | CC Conditioning<br>8 am-Meet @<br>Splashpad Clinton<br>Twp. Civic Center |  |  |  |

# August 2024

| Sunday  | Monday  | Tuesday   | Wednesday   | Thursday  | Friday  | Saturday  |
|---|---|---|---|---|---|---|
| <br>OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12 | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12 building                                      | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12 building<br><b>Pool 4:00 pm</b>             | CC Conditioning<br>8 am-Meet @<br>Splashpad Clinton Twp.<br>Civic Center                        | CC Conditioning<br>8 am - Meet between<br>NGC and 10/12 building                  | CC Conditioning 8am<br><b>AM Pool</b><br>XC meet @ Hanson's<br>Utica store 7PM<br>Register online<br><b>CAMP FEE DUE!</b> | OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12 building               |
| 4<br>OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12 building  | 5<br>CC Conditioning<br>8 am - Meet between<br>NGC and 10/12 building                                 | 6<br>CC Conditioning<br>8 am - Meet between<br>NGC and 10/12 building<br><b>Pool 4:00 pm</b>        | 7<br>CC Conditioning<br>8 am-Meet @<br>Splashpad Clinton Twp.<br>Civic Center                   | 8<br>CC Conditioning<br>8 am - Meet between<br>NGC and 10/12 building             | 9<br>CC Conditioning<br>8 am - Meet between<br>NGC and 10/12 building<br><b>AM Pool</b>                                   | 10<br>OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12 building         |
| 11<br>OPTIONAL<br>CONDITIONING<br>9 am - Meet between<br>NGC and 10/12 building   | 12<br><b>1st OFFICIAL CC<br/>           Practice</b><br>8 am - Meet between<br>NGC and 10/12 building | 13<br><b>CC Practice</b><br>8 am - Meet between<br>NGC and 10/12 building<br><b>Pool 4:00 pm</b>    | 14<br><b>CC Practice</b><br>8 am-Meet @<br>Splashpad Clinton Twp.<br>Civic Center               | 15<br><b>CC Practice</b><br>8 am - Meet between<br>NGC and 10/12 building         | 16<br><b>DEPART FOR CC CAMP</b><br>----->   | 17<br> |
| 18<br>On your own   | 19<br>On your own   | 20<br>On your own   | 21<br>On your own   | 22<br>On your own   | 23<br>On your own   | 24<br>On your own   |
| 25<br>On your own   | 26<br><b>CC Practice</b><br>2:30 pm - Meet between<br>NGC and 10/12 building                          | 27<br><b>CC Practice</b><br>2:30 pm - Meet between<br>NGC and 10/12 building<br><b>Pool 4:00 pm</b> | 28<br>Early Bird Invite @ Lake<br>St. Clair Metropark 4:30<br>PM Bus 2 pm<br>Team BBQ afterward | 29<br><b>CC Practice</b><br>8 am-Meet @<br>Splashpad Clinton Twp.<br>Civic Center | 30<br><b>CC Practice</b><br>8 am - Meet between<br>NGC and 10/12 building<br><b>AM Pool</b>                               | 31<br>On your own   |

# DAKOTA

## CC TEAM CAMP @ Bambi Lake August 16th - Aug. 23rd

# DAKOTA CROSS COUNTRY TEAM CAMP 2024



Coach Timpa: [mtimpa@cvs.k12.mi.us](mailto:mtimpa@cvs.k12.mi.us)

Coach Roginski: [eroginski@cvs.k12.mi.us](mailto:eroginski@cvs.k12.mi.us)



## DHS XC

**When: August 16 - August 23**

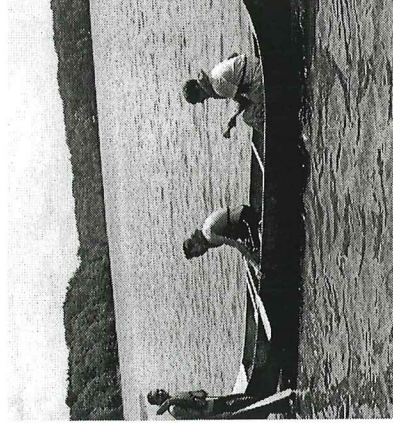
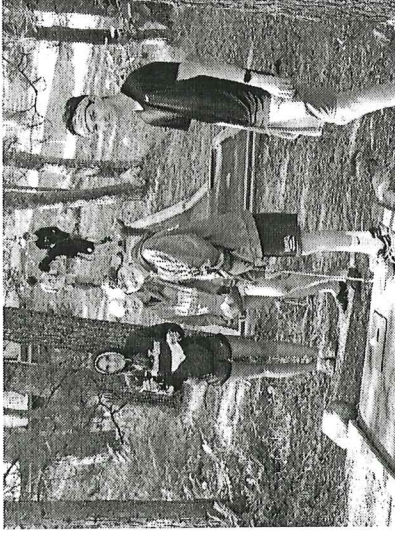
**Where:** Bambi Lake Retreat &  
Conference Center  
3468 East Robinson Lake Road  
Roscommon, MI 48653

**Why:** To create a close knit team environment, learn about running physiology, philosophy, strategy, diet and nutrition and to get prepared for the upcoming competitive season.

**Who:** Any high school athlete who

- A. has an updated athletic physical
- B. Meets these fitness requirements
  - Can run 30min. w/o stopping
  - Attend a minimum of 10 conditioning sessions
  - Cumulative total mileage for the summer of 50 miles
- C. Is a member in good standing of the current/upcoming DHS CC team.

It is recommended that any runner joining the cross country team for the upcoming season attend camp. There are minimum fitness requirements to ensure that all attending camp will be able to handle the workload without risking injury. Seven day total mileage will vary from 30 - 70 miles. **Freshman are highly encouraged to attend.**





# SUMMER CONDITIONING

## Mid June to Mid August

Summer conditioning is open to any middle school or high school athlete who wants to build endurance and/or prepare for the cross country season. By the end of the summer athletes will be able to complete a 5K race.

Location: Between the 9th grade center and the 10-12 building. See schedule on below.

It is highly recommended to attend summer conditioning practices to prepare for the team camp

### Summer Conditioning Schedule:

All practices will meet between the 9th grade center and main building.

- Monday: 8 am**
- Tuesday: 8 am**
- Wednesday 8am**
- Thursday: 8 am**
- Friday: 8 am**
- Saturday: 9 am**
- Sunday: TBD**

\*Most Wednesdays are travel days to local parks and trails. See conditioning schedule for any changes

### **Nutrition is #1:**

To keep cross country athletes healthy nutrition is #1. Athletes will learn the benefits of a well balanced diet containing protein, and carbohydrates as well as consistent hydration. You need food to fuel your body!

**Cost: \$425\***

\*All prices are subject to change due to changing camp fees

Family pricing: more than 1 athlete attending camp? Contact the coaches for information about possible family prices.

Includes: Transportation, Lodging, 3 meals/day, drinks, snacks, camp shirt, other activities if offered may include swimming, canoes, mini golf, ropes course etc.

***Payments online  
through PaySchool Central***

**Camp Fee:** due August 12th.

### Sample Daily Schedule

- 7:00 am Morning Run
- 8:00 am Breakfast
- 9 am - noon Group Activity/  
Camp Cup/Sports
- 12:30 pm Lunch
- 1:30 - 4:00 pm Camp Games/  
Travel
- 4:00 pm Afternoon Run
- 6:30 pm Dinner
- 7:00 - 9:00 pm Group activities/  
Team meetings
- 10:30 pm Lights out



### Pre-Registration

Name: \_\_\_\_\_

MALE FEMALE 9 10 11 12

Address: \_\_\_\_\_

City: \_\_\_\_\_ MI Zip: \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

### Contact Information

Email: \_\_\_\_\_

Parent/Guardian Phone: \_\_\_\_\_

( ) \_\_\_\_\_

Athlete Phone: \_\_\_\_\_

( ) \_\_\_\_\_

### CC Camp Shirt Size

S M L XL

\*Please fill out and return this form if you are interested in attending camp

Coach Zarzycki — Girls Team  
Coach Timpa — Boys Team





MEDICAL HISTORY: Completed by Parent or Guardian or 18-Year-Old

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Doctor: \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_ Date of Exam: \_\_\_\_\_

| - GENERAL QUESTIONS  |  | Y | N |
|--|--|---|---|
| Has a doctor ever denied or restricted your participation in sports for any reason?  |  |   |   |
| Do you have any ongoing medical conditions? If so, please identify below:  |  |   |   |
| <input type="checkbox"/> Asthma <input type="checkbox"/> Anemia <input type="checkbox"/> Diabetes <input type="checkbox"/> Infections <input type="checkbox"/> Other:  |  |   |   |
| Have you ever spent the night in the hospital or have you ever had surgery?  |  |   |   |
| - HEART HEALTH QUESTIONS ABOUT YOU   |  | Y | N |
| Have you ever passed out or nearly passed out DURING or AFTER exercise?  |  |   |   |
| Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?  |  |   |   |
| Does your heart ever race or skip beats (irregular beats) during exercise?   |  |   |   |
| Has a doctor ever told you that you have any heart problems? Check all that apply:   |  |   |   |
| <input type="checkbox"/> High blood pressure <input type="checkbox"/> Heart murmur <input type="checkbox"/> Heart infection <input type="checkbox"/> High cholesterol  |  |   |   |
| <input type="checkbox"/> Kawasaki disease <input type="checkbox"/> Other:  |  |   |   |
| Has a doctor ordered a test for your heart? (example, ECG/EKG, echocardiogram)   |  |   |   |
| Do you get lightheaded or feel more short of breath than expected during exercise?   |  |   |   |
| Do you have a history of seizure disorder or had an unexplained seizure?   |  |   |   |
| Do you get more tired or short of breath more quickly than your friends during exercise?   |  |   |   |
| - HEART HEALTH QUESTIONS ABOUT YOUR FAMILY   |  | Y | N |
| Has anyone in your family had unexplained fainting, unexplained seizures or near drowning?   |  |   |   |
| Does anyone in your family have a heart problem, pacemaker or implanted defibrillator?   |  |   |   |
| Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 50 (including drowning, unexplained car accident or sudden infant death syndrome)?  |  |   |   |
| Does anyone in your family have hypertrophic cardiomyopathy, Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome or catecholaminergic polymorphic ventricular tachycardia? |  |   |   |
| - BONE AND JOINT QUESTIONS   |  | Y | N |
| Have you ever had an injury to a bone, muscle, ligament or tendon that caused you to miss a practice or a game?  |  |   |   |
| Have you ever had any broken or fractured bones, dislocated joints or stress fracture?   |  |   |   |
| Have you ever had an injury that required x-rays, MRI, CT scan, injections, therapy, a brace, a cast or crutches?  |  |   |   |
| Do you regularly use a brace, orthotics or other assistive device?   |  |   |   |
| Do you have a bone, muscle or joint injury that bothers you?   |  |   |   |
| Do any of your joints become painful, swollen, feel warm or look red?  |  |   |   |
| Do you have any history of juvenile arthritis or connective tissue disease?  |  |   |   |
| Have you ever had an x-ray for neck instability or atlantoaxial instability (Down syndrome or dwarfism)?   |  |   |   |

| - MEDICAL QUESTIONS   |  | Y | N |
|---|--|---|---|
| Do you cough, wheeze or have difficulty breathing during or after exercise?                                       |  |   |   |
| Have you ever used an inhaler or taken asthma medicine?   |  |   |   |
| Is there anyone in your family who has asthma?  |  |   |   |
| Were you born without, or missing a kidney, eye, testicle (males), spleen or any other organ?                     |  |   |   |
| Do you have groin pain or a painful bulge or hernia in the groin area?  |  |   |   |
| Have you had infectious mononucleosis (mono) within the last month?   |  |   |   |
| Do you have any rashes, pressure sores or other skin problems?  |  |   |   |
| Have you had a herpes or MRSA skin infection?   |  |   |   |
| Do you have headaches or get frequent muscle cramps when exercising?  |  |   |   |
| Have you ever become ill while exercising in the heat?  |  |   |   |
| Do you or someone in your family have sickle cell trait or disease?   |  |   |   |
| Have you had any problems with your eyes or vision or any eye injuries?   |  |   |   |
| Do you wear glasses or contact lenses?  |  |   |   |
| Do you wear protective eyewear such as goggles or a face shield?  |  |   |   |
| Immunization History: Are you missing any recommended vaccines?   |  |   |   |
| Do you have any allergies?  |  |   |   |
| Have you ever had a head injury or concussion?  |  |   |   |
| Do you have any concerns that you would like to discuss with a doctor?  |  |   |   |
| Have you ever received a blow to the head that caused confusion, prolonged headache or memory problems?           |  |   |   |
| Have you ever had numbness, tingling, weakness or inability to move your arms or legs after being hit or falling? |  |   |   |
| Have you ever had an eating disorder?   |  |   |   |
| Do you worry about your weight?   |  |   |   |
| Are you trying to or has anyone recommended that you gain or lose weight?   |  |   |   |
| Are you on a special diet or do you avoid certain types of foods?   |  |   |   |
| - FEMALES ONLY (Optional)   |  | Y | N |
| Have you ever had a menstrual period?   |  |   |   |
| How old were you when you had your first menstrual period?  |  |   |   |
| How many periods have you had in the last 12 months?  |  |   |   |
| <b>CURRENT-YEAR PHYSICAL = GIVEN ON OR AFTER APRIL 15 OF THE PREVIOUS SCHOOL YEAR</b>                             |  |   |   |

PHYSICAL EXAMINATION & MEDICAL CLEARANCE: Completed by MD, DO, PA or NP - RETURN DIRECTLY TO PATIENT

EXAMINATION: Height: \_\_\_\_\_ Weight: \_\_\_\_\_  Male  Female BP: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_ Vision: R 20/ \_\_\_\_\_ L 20/ \_\_\_\_\_ Corrected:  Y  N

| MEDICAL   | NORMAL | ABNORMAL | MUSCULOSKELETAL      | NORMAL | ABNORMAL |
|---|--------|----------|----------------------|--------|----------|
| Appearance: Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, arm span > height, hyperlaxity, myopia, MVP, aortic insufficiency) |        |          | Neck                 |        |          |
| Eyes/Ears/Nose/Throat: Pupils Equal Hearing   |        |          | Back                 |        |          |
| Lymph nodes   |        |          | Shoulder/Arm         |        |          |
| Heart: Murmurs (auscultation standing, supine, +/- Valsalva) Location of point of maximal impulse (PMI)   |        |          | Elbow/Forearm        |        |          |
| Pulses: Simultaneous femoral and radial pulses  |        |          | Wrist/Hand/Fingers   |        |          |
| Lungs   |        |          | Hip/Thigh            |        |          |
| Abdomen   |        |          | Knee                 |        |          |
| Genitourinary (males only)  |        |          | Leg/Ankle            |        |          |
| Skin: HSV: Lesions suggestive of MRSA, tinea corporis   |        |          | Foot/Toes            |        |          |
| Neurologic  |        |          | Functional Duck Walk |        |          |

RECOMMENDATIONS: \_\_\_\_\_  
I certify that I have examined the above student and recommend him/her as being able to compete in supervised athletic activities NOT crossed out below.  
BASEBALL - BASKETBALL - BOWLING - COMPETITIVE CHEER - CROSS COUNTRY - FOOTBALL - GOLF - GYMNASTICS - ICE HOCKEY  
LACROSSE - SKIING - SOCCER - SOFTBALL - SWIMMING/DIVING - TENNIS - TRACK & FIELD - VOLLEYBALL - WRESTLING

**EXAMINER** Name of Examiner (print/type): \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of Examiner: \_\_\_\_\_ (Check One):  MD  DO  PA  NP  
----- (DETACH HERE IF NEEDED TO ACCOMPANY STUDENT-ATHLETE) -----

EMERGENCY INFORMATION: COMPLETED BY PARENT or GUARDIAN or 18-YEAR-OLD

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Doctor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
IN EMERGENCY (1): \_\_\_\_\_ Home #: (\_\_\_\_) \_\_\_\_\_ Cell #: (\_\_\_\_) \_\_\_\_\_  
IN EMERGENCY (2): \_\_\_\_\_ Home #: (\_\_\_\_) \_\_\_\_\_ Cell #: (\_\_\_\_) \_\_\_\_\_  
Drug Reactions: \_\_\_\_\_ Current Medications: \_\_\_\_\_  
Allergies: \_\_\_\_\_



PRE-PARTICIPATION PHYSICAL - CONSENT - INSURANCE

Shaded headline areas are to be completed by student, parent/guardian or 18-year-old

There are FOUR (4) signatures on this page 4 to be completed by student, parent/guardian and/or 18-year-old

A CURRENT-YEAR PHYSICAL IS ONE GIVEN ON OR AFTER APRIL 15 OF THE PREVIOUS SCHOOL YEAR

Form fields for Student Name, Student Address, Gender, Age, Date of Birth, Place of Birth, School, Circle Grade, Father/Guardian Name, Phone (home/work/cell), Mother/Guardian Name, Phone (home/work/cell), and Email Address.

STUDENT PARTICIPATION & PARENT or GUARDIAN or 18-YEAR-OLD CONSENT

The information submitted herein is truthful to the best of my knowledge. By my/my child's signature below, I/we acknowledge that I/we have received concussion educational information that meets Michigan Department of Health and Human Services and MHSAA requirements.

Further, in consideration of my/my child's participation in MHSAA-sponsored athletics, I/we do hereby agree, understand, appreciate, and acknowledge: that participation in such athletics is purely voluntary; that such activities involve physical exertion and contact and that there is inherent risk of personal injury associated with participation in such activities, which risk I/we assume; and that I/we agree to, and hereby waive any and all claims, suits, losses, actions, or causes of action against the MHSAA, its members, officers, representatives, committee members, employees, agents, attorneys, insurers, volunteers, and affiliates based on any injury to me, my child, or any person, whether because of inherent risk, accident, negligence, or otherwise, during or arising in any way from my/my child's participation in an MHSAA-sponsored sport.

I/we understand that I am/we are expected to adhere firmly to all established athletic policies of my school district and the MHSAA. I/we hereby give my consent for the above student to engage in interscholastic athletics and for the disclosure to the MHSAA of information otherwise protected by FERPA and HIPAA for the purpose of determining eligibility for interscholastic athletics. My child has my permission to accompany the team as a member on its out-of-town trips.

Signature and Date lines for Student (1) and Parent/Guardian/18-Year-Old (2).

INSURANCE STATEMENT

Insurance statement section including a compliance statement and a health insurance form with YES/NO checkboxes, Family Insurance Co, and Insurance ID #.

Signature and Date line for Parent/Guardian/18-Year-Old (3).

(DETACH HERE IF NEEDED TO ACCOMPANY STUDENT-ATHLETE)

MEDICAL TREATMENT CONSENT: COMPLETED BY PARENT or GUARDIAN or 18-YEAR-OLD

I, \_\_\_\_\_, an 18-year-old, or the parent or guardian of \_\_\_\_\_, recognize that as a result of athletic participation, medical treatment on an emergency basis may be necessary, and further recognize that school personnel may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under the then-existing circumstances and to assume the expenses of such care.

Signature and Date line for Parent/Guardian/18-Year-Old (4).

## PlanetHS Account Instructions - New Accounts

- 1) Go to [www.planeths.com](http://www.planeths.com)
- 2) Click sign up at the bottom of the page.
- 3) Fill in your information and click sign up (parents and students)
- 4) **For Parents:** you will be prompted to fill in your child's emergency contact information.
- 5) After you have filled in the emergency contact information link your child's account with yours on the left side of the page. **Please make sure you know which email/phone number your child has used to register.**
- 6) Once everything is linked, go to the blue bar at the top of the page and click on athletic forms.
- 7) At the bottom of the page, you will see the following:
  - Health Questionnaire/Physical
  - Insurance Consent Form
  - Parent/Athlete Concussion Form
  - Emergency Contact Form
  - Code of Conduct/ImPACT signature form
  - Impact concussion test (staff upload only)
- 8) Upload a physical dated after 4/15/2023 into the physical space.
- 9) Insurance consent, concussion form, emergency contact form and code of conduct **MUST** be signed electronically. **DO NOT UPLOAD ANYTHING HERE.**

## PlanetHS Account Instructions - Previous Accounts

- 1) Go to [www.planeths.com](http://www.planeths.com) and login.
- 2) Select sport/s athlete wants to play for school year.
- 3) At the bottom of the page, you will see the following:
  - a. Health Questionnaire/Physical
  - b. Insurance Consent Form
  - c. Parent/Athlete Concussion Form
  - d. Emergency Contact Form
  - e. Code of Conduct/ImPACT signature form
  - f. Impact concussion test (staff upload only)
- 4) Upload a physical dated after 4/15/2021 into the physical space.
- 5) Insurance consent, concussion form, emergency contact form and code of conduct **MUST** be signed electronically. **DO NOT UPLOAD ANYTHING HERE.**

## DAKOTA COUGARS CROSS COUNTRY

### How to earn a Varsity Letter:

achieve one or more of the following

- Run under 18:30 (Men) 22:00 (Women) twice during the season
- Run varsity in the MAC, County, Regional or State meet.
- Earn All Conference, All County, All State or are a State Qualifier
- 4 years on the XC team in Good Standing (Service, Leadership, Character, Scholarship)
- Exchange students in Good Standing
- Coach's Decision

### How to earn a Toe Token:

achieve one or more of the following

- Qualify for the State Finals
- Perfect attendance during the summer or season
- Run 30, 100 consecutive days
- Be named athlete of the meet
- Complete first 5K
- Set at least 5 Personal Records in one season
- Run in all the races in a season (those you are eligible for)
- Compete in 3 Indoor Track & Field Meets (out of season)
- Compete in 3 road races in the summer or the winter

### How to earn a Mileage Club T-shirt:

do both of the following

- Run 250, 375, 500, or 625 miles in the offseason (Summer or Winter)
- Log your miles on paper, computer or GPS watch

cougars  
xccc