

HUNTERDON CENTRAL REGIONAL HIGH SCHOOL

ATHLETIC REGISTRATION INFORMATION

Additional information and required forms are posted online:

<https://www.hcrhs.org/athletics/athletic-registration>

IMPORTANT DATES

Season:	Registration Opens: Health Forms accepted:	Deadline for Submission:	First Day of Season:
FALL	05/16/18	07/9/18	08/8/18
WINTER	Medical forms - 08/07/18 Aspen - 09/03/18	10/05/18	11/05/18
SPRING	12/03/18	02/01/19	03/01/19

FOR THE ATHLETIC OFFICE:

1. **Aspen Registration:** Student athletes must be registered in Aspen for each sport season. Please note: registration must be done through a Parent Aspen Account; a student account cannot be used. Information on creating a Parent Aspen Account is available online. From our Homepage, click on "Quicklinks", then "Aspen Login & Information". For complete registration information, click on "Athletics" then "Athletic Registration".
2. **ImPACT Concussion Testing:** Freshmen, juniors and new students must complete ImPACT Concussion testing prior to their sport's preseason. Information on how to do ImPACT testing is posted on the Athletic Registration Webpage.

FOR THE HEALTH OFFICE:

Paperwork must be turned in to Grade Level Health Offices as a complete package by the deadline date. Missing information will result in a delay in medical clearance for participation. Incomplete forms will be returned to the student/parent for completion.

1. **Pre-participation Physical Evaluation – History Form & Physical Exam Packet (4 pages):**
A medical examination is required once per year, within **365 days prior** of the first day of sports season.
 - **History Form** - completed, signed and dated by parent and athlete; physician must record exam date on line 1.
 - **Athletes with Special Needs Supplemental History Form** - when applicable; if not applicable, sign, date and write N/A
 - **Physical Exam Form** - must be completed in its entirety; verify that nothing is left blank before leaving the physician's office.
 - **Clearance Form** - must be completed in its entirety; physician must stamp, sign and date exam Portion, and must sign and date the *Completed Cardiac Assessment Professional Development Module*.
2. **State of NJ DOE Health History Update Questionnaire:**
Signed and dated no more than **90 days prior** to first day of sports season. This form should only be provided if the physical exam & history forms meet the above criteria and were previously submitted to Health Offices.
3. **Medication Forms:** Required every school year as applicable, i.e. Asthma Inhaler, EpiPen, Medications, etc.

FOR THE BUSINESS OFFICE:

Pay to Participate: Due when teams are selected by the coaching staff. There is a one-time school year fee of \$100, with a \$200 cap per family, per school year.

Questions about sports participation, please contact the Athletic Department. Questions about health forms and physicals, please contact Grade Level Health Offices: