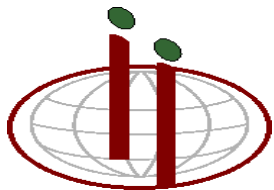


# Innovations International Charter School of Nevada



Educating For Life



The mission of the IICSN athletic program is to provide avenues that will allow our students to grow and prosper. IICSN feels that athletics will help provide balance to the student athlete's life. We believe that participation in athletics provides a wealth of opportunities and experiences that assist students in personal, athletic and academic growth.

As parents of student athletes, you also have committed yourself to certain responsibilities and obligations, which are outlined in the Athletic Code. Your signature along with your student-athlete's signature indicates that you understand and except those responsibilities. Furthermore you agree to cooperate with school personal in enforcing the Athletic Code. Failure to comply with the Athletic Code may lead to expulsion from the team. In addition, student athletes are also subject to discipline under the IICSN Code of Conduct.

I, \_\_\_\_\_ hereby pledge honor and support IICSN by adhering to the Athletic Code of Conduct as stated below.

- \*I will not be disrespectful to my coaches, teammates, opponents, officials, parents and spectators.
- \*I will not taunt my opponent, be arrogant or over zealous in my celebration.
- \*I will not use drugs, alcohol, tobacco, or performance enhancing drugs.
- \*I will arrive on time for practice, meetings and games; unless previously arranged or if an emergency arises.
- \*I will show good sportsmanship, both in victory and defeat.
- \*I will be respectful to school property of our school and schools we visit.
- \*I will assist and encourage my teammates in becoming better athletes and human beings.
- \*I will be responsible for any uniform or equipment checked out to me. If lost, I will replace it at cost.
- \*I will maintain at least a 2.00 GPA in the classroom.

The administration at IICSN reserves the right to have the final say on all disciplinary actions. The penalties that are handed down will be consistent with the rule of IICSN, NIAA, and the VAC.

I have read and agree with the above, and the mission statement of IICSN athletic department. I understand that it is a privilege to play athletics at IICSN.

Parent's Signature: \_\_\_\_\_

Date \_\_\_\_\_

Student's Signature: \_\_\_\_\_

Date \_\_\_\_\_

\*\*\* Valid for 1 year