

2021 Emmet Field Cross Country



Dear Parents,

Your child in grade 1 through 5 has the opportunity to run on the Cross Country Team. You are to take your child outside and see if they can do a SLOW jog without stopping for 8 minutes. If they cannot then its not recommended to be on the team but do something to build their fitness and stamina for next years team. They then need to be taken to the doctor to get a PHYSICAL COMPLETED (The proper form is attached to take it and have it filled out completely) so that I know that they can handle vigorous exercise. No one should be allowed to participate without proper paperwork completed. There are numerous benefits to being on the team such as being physically fit, building self esteem, making friendships, bonding with other families and coaches, use as a building block to be able to try - out and make other teams and sports. It can be done by anyone regardless of body shape and size, and you do not have to be a great athlete. If you need to talk to a coach then info is provided below. If you are not in town or on vacation then when you arrive back to Louisville then have your child start coming to practice. This summer when you come to practice then we will get you hooked up to our Emmet Field Cross Country app or website to get all information on Practices, Schedules, Calendars, Races, Uniforms. In years past we have used shutterfly and Team Snap.

***The team will start practicing on Monday evenings at 8:00 - 9:15pm., Wednesday evenings at 8:00 - 9:15pm. and Saturday mornings at 9:00 - 10:15 am.(Starting July 19th)). Most practices are held at Seneca Park (we always meet just outside of the restrooms). Please bring your paperwork filled out in its entirety. We practice in the summer months late in the evenings and Saturday mornings to avoid the summer heat.**

We will compete in approximately 8 meets. Once school starts in August, the team will practice in the evenings at Seneca Park at 6:00pm and conclude at 7:30pm. We always practice in bad weather (this includes rain, sleet or snow, unless thunderstorms and lightning are in the immediate area (then we will practice at Emmet Field Elementary schools gym and hallways). Races that we will compete in will range from .5 miles to 1.8 miles depending on each runners grade and age. Most races will be in Jefferson County and the season will conclude the 3rd week in October at the State Meet.

After our state meet in October those that qualify will be able to run on the Louisville Tiger Shark National Cross Country Team that Coach Johnson also coaches from November to December. More info will come later on our website.

Runners can bring a water bottle to practice as well as a towel or yoga pad to stretch and do Core Exercises. **I WILL BE IN NEED OF PARENTS COMING TO PRACTICES AND TO MEETS TO ASSIST ME WITH COACHING AND BASIC ORGANIZATIONAL ACTIVITIES.** The success of your child and this program is parents doing things to help. It is set up for parents to run under the direction of the head coaches. If you are able then we need adults to run with the kids at practice - especially our newbies and younger runners. **I WILL NEED MUCH HELP IN COACHING, MANAGING, MONITORING THE KIDS AT EVERY PRACTICE.** In most practices the runners are grouped by grade level and or ability. This is a team that expects nothing but the best and will not a babysitting service.

Once your child has done a "SELF ASSESSMENT (Can do a SLOW jog without stopping for 8 minutes) and have gotten a PHYSICAL FROM A PHYSICIAN (USE THE FORM ON THE NEXT PAGE), then fill out the bottom portion of this form and return to Coach Dan Johnson. I am really looking forward in starting our 10th year of Cross Country. Once these things are done then we will get you connected to our Website or App.

THE COST TO BE ON THE TEAM IS \$70.00

(If you can not pay then we will find a sponsor for your child to cover cost)

Sincerely,
Coach Dan Johnson
dan.johnson@jefferson.kyschools.us
502 689-2093 (Call me if you have questions!)
Coach Brandon Ghrist
brandon.ghrist@jefferson.kyschools.us

Name:..... Grade:.....(2021 - 2022 School Year)

Jersey Size: YS YM YL AS AM AL Short Size: YS YM YL AS AM AL (Circle One)

Parents Name:.....(Please include both parents)

Email to receive info MOM:.....DAD:.....

MOM PHONE#.....DAD PHONE#.....

PREPARTICIPATION PHYSICAL EVALUATION PHYSICAL EXAMINATION FORM



Name _____ Date of birth _____

PROVIDER REMINDERS

- Consider additional questions on more sensitive issues
 - Do you feel stressed out or under a lot of pressure?
 - Do you ever feel sad, hopeless, depressed, or anxious?
 - Do you feel safe at your home or residence?
 - Have you ever tried cigarettes, chewing tobacco, snuff, or dip?
 - During the past 30 days, did you use chewing tobacco, snuff, or dip?
 - Do you drink alcohol or use any other drugs?
 - Have you ever taken anabolic steroids or used any other performance supplement?
 - Have you ever taken any supplements to help you gain or lose weight or improve your performance?
 - Do you wear a seat belt, use a helmet, and use condoms?
- Consider reviewing questions on cardiovascular symptoms (questions 5–14).

EXAMINATION		Corrected	Y	N
Height	Weight	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
BP	Pulse	Visual H 20'	L 20'	
MEDICAL		NORMAL		
ABNORMAL FINDINGS				
Appearance				
<ul style="list-style-type: none"> Marian stigmata (hypochromic, high-arched palate, pectus excavatum, tachycardia) arm span > height, hyperlordosis, myopia, MVP, aortic insufficiency 				
Eyes/ear/nose/throat				
<ul style="list-style-type: none"> Pupils equal Hearing 				
Lymph nodes				
Heart*				
<ul style="list-style-type: none"> Murmurs (aortic/cortic stenosis, aortic, +/- Valvular) Location of point of maximal impulse (PMI) 				
Pulses				
<ul style="list-style-type: none"> Simultaneous femoral and radial pulses 				
Lungs				
Abdomen				
Genitourinary (males only)				
Skin				
<ul style="list-style-type: none"> HSV, lesions suggestive of MRSA, tinea corporis 				
Neurologic*				
MUSCULOSKELETAL				
Neck				
Back				
Shoulder/arm				
Elbow/forearm				
Wrist/hand/fingers				
Hip/thigh				
Knee				
Leg/ankle				
Foot/heel				
Functional				
<ul style="list-style-type: none"> Duck walk, single leg hop 				

*Consider ECG, echocardiogram, and referral to cardiology for abnormal cardiac history or exam.

*Consider full exam if in clinic setting. Having had party present is recommended.

*Consider cognitive evaluation or baseline neurophysiologic testing if a history of significant concussion.

- Cleared for all sports without restriction
- Cleared for all sports without restriction with recommendations for further evaluation or treatment for _____

- Not cleared
- Pending further evaluation
- For any sports
- For certain sports

Reason _____

Recommendations _____

I have examined the above-named student and completed the preparticipation physical evaluation. The athlete does not present apparent clinical contraindications to practice and participate in the sport(s) as defined above. A copy of the physical exam is on record in my office and can be made available to the school at the request of the parent. If conditions arise after the athlete has been cleared for participation, the physician may rescind the clearance until the problem is resolved and the potential consequences are completely explained to the athlete (and parents/guardians).

Name of physician (print/type) _____ Date _____
Address _____ Phone _____

Signature of physician _____ MD or DO _____