

# Caurus Academy

41900 N. 42 Ave.

Anthem, AZ 85086

Phone: 623/551-5083 FAX: 623-551-5679

**Coach Klein – November 2, 2011**

## INTRODUCTION

**This year Caurus Basketball was accepted into the Independent Youth Athletic Association (IYAC) League. We will be playing approximately 10 games plus a tournament. Most opponent schools are located south of the 101 freeway. For away games we will have a “traveling team” that consists of 7 boys for the boy’s team, and 7 ladies for the ladies team (transportation reasons). All players will dress out for home games.**

Caurus Basketball is a team designed to help young players develop the skills necessary to reach their full potential as student athletes. Caurus’s coaches emphasize developing the complete player, with focus on execution in the classroom, learning fundamentals of the game, and developing life skills. The knowledge, experience and leadership skills of our coaching staff, gives players the opportunity to take their game to the next level. (High School)

The goal of the Huskies program is to provide the opportunity to learn the game of basketball with lessons that pertain to everyday life. It is our belief that basketball is an avenue to teach various attributes such as sportsmanship, discipline, cooperation, competition, self-confidence, and teamwork.

### OUR COMMITMENT TO YOU:

Our staff will abide by the following rules:

1. We will treat you with respect at all times.
2. We will be honest, truthful, and up-front about your basketball skills and development.
3. We will give you the best coaching and instruction possible to improve your basketball skills.
4. Open Door Policy: We believe that your perception of our performance is always important. For that reason, and others, we welcome your feedback. We believe it is essential to building and maintaining a successful program.
5. We will conduct ourselves in a manner that will be a positive example or the players and the program at all times.

6. Each coach will have his/her coaching philosophy on record for review by any parent or player.

### **Coaches' Philosophy:**

The philosophy of Caurus Basketball has been formed by the staff, with a combination of many years as successful players, coaches, and/or trainers. The staff believes that coaches should motivate and challenge athletes to accomplish their goals on and off the court. Our coaching staff is dedicated to providing athletes with the opportunity to work hard with disciplined instruction daily. We focus on basic fundamental drills and progress into high intensity game-like drills striving to prepare our athletes for the next level of competition. Caurus is dedicated to training the committed athlete so that they are achieving their highest level of skill possible. This takes great discipline and consistency from the athlete, as well as consistency from the coach. Caurus takes pride in the knowledge of the staff and the potential of each player within the program.

## **Program Rules and Expectations**

**As a member of Caurus Basketball, the following is expected of you:**

**CLASSWORK COMES FIRST.** Each player is expected to strive for academic as well as athletic excellence. **A player's class work and performance in school takes precedence over basketball.** All players are expected to perform well academically, to complete their homework and studying first so as not to interfere with their commitment to basketball. Each player is expected by Coach Klein to have a 70% or greater in **each** class to be able to participate in games. The player will still be required to attend and participate in every practice, but will not be able to participate in games.

Should the player be unable to attend practice to complete academic responsibilities, the parent should communicate this directly to the coach. While academics take priority, it is not acceptable to miss practice due to school workloads. The goal is to assist the student-athlete in being able to balance both academic and athletic expectations. Should a player be unable to perform at an acceptable level academically and athletically, the player should withdraw from the team until such time as the academic performance improves. This is a parental decision; however, the coach and team assume that each player will be present for all practices and games. Repeated absences could result in diminished playing time and/or potential dismissal at the discretion of the coach. (See Attendance Policies)

**COMMITMENT.** During the basketball season, the basketball team should take precedence over all other extracurricular activities. The season runs from November 2011 to February 2012. Teams will play anywhere from 1-15 games in a season. Afterward they will be encouraged to participate in post season conditioning and club

basketball. Practice is a critical element of individual skill development and team success. Each team will practice Monday through Thursday, unless there is a game. Practices are structured by the coach to improve individual skills, build team strategies and develop the sense of team. Each coach devotes a substantial amount of time in the design and delivery of each practice. Each coach is committed to teach the players as much as they can about the game of basketball so that each player can become the best that they are capable of being. Players agree to work hard at all times in an effort to learn as much as they can, to improve their individual skills and contribute to success of the team. While all players should have fun, that is not the only goal of the program. The objective of this program is to develop advanced basketball skills within a highly competitive environment, while at the same time learning the values of hard work, preparation and teamwork. Ultimately, we strive to develop players and teams that will one day compete at competitive High School then NCAA level.

**BEHAVIOR.** Negative attitudes and/or behavior will in no way be tolerated by ANYONE affiliated with the Caurus Basketball program. Each player represents and serves as a reflection of him/herself, his/her family coaches, team and community. Each player is to conduct him/herself responsibly both on and off the court, to display sportsmanship on the court and to demonstrate concern for the rights, safety and welfare of others off the court. All players and parents are expected to treat the coaches, teammates, competitors and referees with respect and courtesy. Behavior that shows disrespect toward other players, coaches, and referees, or demonstrates lack of self-control by ANYONE in the program (not to exclude staff) will be subject to discipline. The coach will determine appropriate disciplinary actions. Should the behavior continue to be inappropriate, the coach may seek the removal of the player, parent, or staff member from the positive atmosphere. There will be severe consequences for any blatant disregard of this rule in particular.

**PLAYING TIME.** The amount of playing time during games is within the sole discretion of the coaching staff of the team. This team is competitive and no player is guaranteed playing time. Each coach will make playing time decisions based solely on the game situation, player's skills, abilities, work ethic and attitudes.

**PRIVILEGE.** As a member of the Caurus Basketball Team, each player understands that participation is a privilege and NOT a right. As part of earning that privilege, and in order to maintain it, more is expected of each player than perhaps ever before. Each player agrees to assume the responsibilities set forth in this contract and each parent/guardian to support its intent. Caurus reserves the right to revoke the privilege of any player to be a member of the team if the player or parent does not exhibit appropriate conduct or otherwise fails to meet the obligations set forth in this contract

**I have read and fully understand the above program rules and expectations of the Caurus Basketball program. I vow to address any comments or concerns with staff as they arise.**

**Athlete's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## PRACTICE AND GAME EXPECTATIONS

- Caurus basketball players and coaches will strive to be disciplined and work hard during workouts, practices and games. Players and coaches should be ready to give their best effort every time on the court.
- Attendance at each practice and all games is mandatory. Players should arrive one hour prior to scheduled game times unless otherwise instructed by the Coaching Staff and should be on time for practices. If a player needs any type of pre-game or practice treatment (i.e. ankle taped) he/she must arrive to practice at least 1 (one) half hour early. If a player must be late, he/she is expected to inform a member of the staff in a timely fashion. (See attendance policies below)
- . Every player is expected to wear his/her assigned uniform to all games. If he/she fails to bring the assigned uniform, it will result in a consequence. **NO UNIFORM - NO PLAY!** Uniforms are expected to be turned in at the end of our last game of the season.
- Each player is expected to listen to the advice, training, and drills suggested and apply what was learned into following practices and games.
- **PLAYING TIME.** The amount of playing time during games is within the sole discretion of the coaching staff of the team. This team is competitive and no player is guaranteed playing time. Each coach will make playing time decisions based on the game situation, players' skills, abilities, work ethic and attitudes.
- If a player is unable to attend a practice or game due to illness, vacation, family emergency, school/religious obligation, then it is the player's responsibility to notify a member of the coaching staff in advance if at all possible with the reason for absence. The coach will determine implications of absences as it relates to playing time and occurrences. Failure to comply will be equivalent to a no call no show. (See attendance policies below.)

### Attendance Policy

More than 1 second tardy to practice = 1/2 occurrence

1 full missed practice = 1 whole occurrence

No call No show = 2 whole occurrences

1 occurrences = automatic suspension of next game

3 missed games = Mandatory hearing between parent, player, coach and athletic director, which could result in possible dismissal from team.

\*Failure to attend hearing will result in automatic dismissal from team.\*

**I have read and fully understand contents of the above practice and game procedures and attendance policies. I fully accept my role in abiding by these expectations. I vow to address any comments or concerns with staff as they arise.**

**Athlete's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Parent/Legal Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_

### **FINANCIAL OBLIGATIONS**

A non-refundable sports fee of \$45 will be charged to play basketball. If interested in other sports it will be a total of \$75. Fees must be paid before the season starts. Students who do not pay the sports fee or make arrangements with the athletic director will be dropped from the sport. Sports fees are due by the third week of the season.

The athlete will pay fees for equipment that can only be used by her/him, including basketball shoes.

Students will be issued uniforms and any equipment needed to play the sport at the beginning of the season. The uniforms and equipment issued to the student must be returned after the season has finished. Failure to return these items will result in the student athlete being charged for them. Students who fail to pay for missing uniforms or equipment lose privilege to participate in athletics at Caurus and may not receive their promotion until the fees are paid.

\*If for any reason you must leave the team, any past dues will not be refunded. You will not responsible for paying any fees moving forward.\*

**I have read and fully understand my financial obligation and contents of the above financial breakdown. I vow to address any comments or concerns with staff as they arise.**

**Parent/Legal Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_

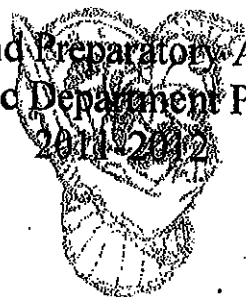
## **PARENTAL GUIDELINES**

The Caurus basketball program strives to promote a positive environment for the players. We want our players to develop positive character traits including sportsmanship, cooperation and self discipline. We believe that parents are a reflection of the program. We want the program to be respected by the opposing players, coaches and parents, as well as referees and anyone else that comes into contact with our program. With this in mind, we ask the parents to abide by the following guidelines:

- Refrain from talking to your player once practice, workout session or a game has started. We want their full attention and focus for the duration of the activity.
- Never speak in a negative way about opposing teams, coaches, parents or referees.
- Discuss with the staff any questions or concerns at appropriate times. (i.e. after practices, meeting, phone call, e-mail preferred.) During practice is never a good time to have a meeting about concerns that are not an emergency.
- We will not tolerate any negative words or actions of our own by a player, parents or anyone on staff.

We will suspend a player or if the problem continues, ask her to leave the program due to inappropriate actions committed by his/her parents or an inappropriate action committed by the player him/herself.

Westwind Preparatory Academy  
Athletic Department Policies



### **Academic Eligibility Policy**

- Students must maintain a passing grade (65% or greater) in every class
- Academic eligibility will be checked on the Monday of every third week. A student who is failing a class becomes ineligible the day following the grade check.
- Students who become ineligible at the grade check may continue to practice with the team; however they are prohibited from playing in any games until they are passing all classes.
- Students may not participate in athletic events or practice if they are absent the day of practice or event.

### **Athletic Fees**

- A non-refundable sports fee of \$45 will be charged per sport or \$75 to play all sports. Fees must be paid before the season starts. Students who do not pay the sports fee or make arrangements with the athletic director will be dropped from the sport. Sports fees are due by the third week of the season.
- The athlete will pay fees for equipment that can only be used by him/her, for one season. For example: socks, hats, visors, etc. This money will be collected prior to ordering the items.
- Students will be issued uniforms and any equipment needed to play the sport at the beginning of the season. The uniforms and equipment issued to the student must be returned after the season has finished. Failure to return these items will result in the student athlete being charged for them. Students who fail to pay for missing uniforms or equipment lose the privilege to participate in athletics at Westwind and may not receive their diploma until the fees are paid.

### **Physicals, Safety and Transportation**

- In order for a student to participate in athletics at Westwind Preparatory Academy, they must submit the following documents: a completed physical packet, emergency transportation form and a signed copy of the Westwind athletic department policies (this document). These documents can be obtained at the Westwind High School office.
- It is the student's responsibility to provide transportation to and from Westwind for games and practices. Students who are being picked up by a parent or guardian after a game or practice need to be off campus by 15 minutes after the end of practice or arriving back to school from a game. **Coaches are not able to transport students in their own vehicles at any time.**

**ACKNOWLEDGMENT OF PARTICIPATION IN PHYSICAL ACTIVITIES AT  
WESTWIND PREPARATORY ACADEMY**

**Participation**

I give permission for our son/daughter to participate in organized interscholastic athletics, realizing that such activity involves the potential for injury which is inherent in all sports. I acknowledge that even with coaching, use of protective equipment, and strict observances of rules, injuries are still possible.

**BY SIGNING THIS DOCUMENT I AM STATING THAT I HAVE READ AND UNDERSTAND THE ATHLETIC POLICIES OF WESTWIND PREPARATORY ACADEMY AND THE ACKNOWLEDGMENT OF PARTICIPATION.**

**STUDENT'S NAME (PLEASE PRINT)** \_\_\_\_\_

**STUDENT'S SIGNATURE** \_\_\_\_\_

**PARENT/GUARDIAN NAME (PLEASE PRINT)** \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE** \_\_\_\_\_

**DATE SIGNED** \_\_\_\_\_

**WESTWIND COMMUNITY SCHOOLS**  
**STUDENT EMERGENCY INFORMATION AND TRANSPORTATION PERMISSION FORM**  
 2011/2012

Name of Student \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male or Female \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

**Please be sure to enter the correct area code for ALL phone numbers listed including cell phones.**

Home Phone (\_\_\_\_) \_\_\_\_\_

Mother Name \_\_\_\_\_ Mother Work Phone (\_\_\_\_) \_\_\_\_\_  
 Cell Phone (\_\_\_\_) \_\_\_\_\_

Father Name \_\_\_\_\_ Father Work Phone (\_\_\_\_) \_\_\_\_\_  
 Cell Phone (\_\_\_\_) \_\_\_\_\_

Guardian Name \_\_\_\_\_ Guardian Work Phone (\_\_\_\_) \_\_\_\_\_  
 Cell Phone (\_\_\_\_) \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relation to Student \_\_\_\_\_  
 (Other than parent/guardian) Phone (\_\_\_\_) \_\_\_\_\_

Medical Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

Name of Insured \_\_\_\_\_ I.D. Number \_\_\_\_\_

Physician Name \_\_\_\_\_ Phone \_\_\_\_\_ Hospital Preference \_\_\_\_\_

Does this student have any medical conditions the school should be aware of?

No  Yes: \_\_\_\_\_

Does this student need to take any medications at school? (SEE: Policies and Procedures)

No  Yes: Medication(s) \_\_\_\_\_  
 Dosage and Time of Day \_\_\_\_\_

Is the student allergic to any medication?

No  Yes: Medication(s) \_\_\_\_\_

I hereby give permission for my student listed above to be transported by Westwind Preparatory Academy for the purpose of school related activities.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

I also give agents of Westwind Preparatory Academy permission to authorize any emergency medical treatment that may become necessary while my student is in school in the event that I cannot be reached. Furthermore, I realize that any expenses related to medical attention given are my responsibility.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

In case of injury or sudden illness, I hereby give authority to any hospital or doctor to render immediate aid as might be required at the time of his/her health and safety. I understand that the expense of this service will be my responsibility.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

WESTWIND PREP ACADEMY  
 WESTWIND MIDDLE SCHOOL  
 2045 N. NORTHERN AVENUE  
 PHOENIX, ARIZONA 85021  
 PH: 602-864-7731  
 FAX: 602-864-7720  
 WWW.WESTWINDACADEMY.ORG

WESTWIND PREP INTERNATIONAL  
 2045 W. NORTHERN AVENUE  
 PHOENIX, ARIZONA 85021  
 PH: 602-864-7731  
 FAX: 602-864-7720  
 WWW.WESTWINDACADEMY.ORG

PARKVIEW MIDDLE SCHOOL  
 8300 E. DANA DRIVE  
 PRESQUE, AZ 86314  
 PH: 928-773-8115  
 FAX: 928-773-8388  
 WWW.PARKVIEWMIDDLE.SCHOOL.ORG

CAURON ACADEMY  
 42302 N. VISONWAY, S-110  
 ANTHEM, ARIZONA 85086  
 PH: 623-551-4093  
 FAX: 623-551-4093  
 WWW.CAURONACADEMY.ORG

WESTWIND PREP ACADEMY  
 AT ANTHEM  
 42302 N. VISONWAY, S-110  
 ANTHEM, ARIZONA 85086  
 PH: 623-551-4093  
 FAX: 623-551-4093



Arizona Interscholastic Association, Inc.

ARIZONA INTERSCHOLASTIC ASSOCIATION, INC.  
7007 North 18<sup>th</sup> Street, Phoenix, Arizona 85020-5552  
Phone: (602) 385-3810 Fax: (602) 385-3779

### ANNUAL PREPARTICIPATION PHYSICAL EXAMINATION

#### ANNUAL PHYSICAL EXAMINATION

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

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Pulse: \_\_\_\_\_ BP: \_\_\_\_\_

Vision: R 20/ \_\_\_\_\_ L 20/ \_\_\_\_\_ Glasses/Contacts: Yes No Pupils: Equal \_\_\_\_\_ Unequal \_\_\_\_\_

	Normal	Abnormal Findings	Initials*
Appearance			
Skin			
Eyes/Ears/Nose			
Throat/ Oropharynx			
Lymph Nodes			
Heart			
Pulses			
Lungs			
Abdomen			
Genitalia/ Hernia			
Neck			
Back			
Shoulder/arm			
Elbow/forearm			
Wrist/hand			
Hip/thigh			
Knee			
Leg/ankle			
Foot			

\*Station-based examination only

#### CLEARANCE

Cleared

Cleared after completing evaluation/rehabilitation for: \_\_\_\_\_

Not Cleared for: \_\_\_\_\_ Reason: \_\_\_\_\_

Recommendations: \_\_\_\_\_

Name of physician (print/type) \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Signature of physician \_\_\_\_\_ MD/DO/NP/PA-C



Arizona Interscholastic Association, Inc.

Form distributed by the Arizona Interscholastic Assoc.

Return to Student's School ONLY

ANNUAL PREPARTICIPATION PHYSICAL EVALUATION

(The Parent or Guardian should fill out this form with assistance from the student athlete.)

Name Sex Age Date of Birth Grade
Address Phone
In case of emergency, contact: Name:
Phone (H): (W)
Cell Phone:

1. Have you had a medical illness or injury since your last check-up or sports physical?
2. Have you ever been hospitalized overnight?
3. Are you currently taking any prescription or nonprescription (over-the-counter) medications or pills or using an Inhaler?
4. Do you have any allergies to medications?
5. Have you ever passed out during or after exercise?
6. Do you have any current skin problems (for example, itching, rashes, acne, warts, fungus, or blisters)?
7. Have you ever had a head injury or concussion?
8. Have you ever become ill from exercising in the heat?

9. Do you cough, wheeze, or have trouble breathing during or after activity?
10. Do you use any special protective or corrective equipment or devices that aren't usually used for your sport or position?
11. Have you had any problems with your eyes or vision?
12. Have you ever had a sprain, strain, or swelling after injury?
13. Do you want to weigh more or less than you do now?
14. Do you feel stressed?
15. Do you or have you ever used:
16. Females Only: When was your first menstrual period?
When was your most recent menstrual period?
How much time do you usually have from the start of one period to the start of another?
How many periods have you had in the last year?
What was the longest time between periods in the last year?

Explanation:

I hereby state that, to the best of my knowledge, my answers to the above questions are complete and correct.
I understand and acknowledge that truthful and accurate information is essential in properly determining whether the student should be cleared for athletic participation.
I hereby consent for the student named above, to be given medical care by the doctor selected by the school.

Signature of Parent/Guardian Signature of Student Athlete Date
FORM 16.7-A 6/09