



Jeffrey S Miller
Athletic Director

HERITAGE ACADEMY ATHLETIC
PACKET 2025-2026

Name: _____ Student ID# _____

Grade _____ Age _____ DOB _____ Gender _____

Sport(s) _____

A student will **not** be eligible to participate (games, practice, tryouts) in any sport without clearance from the Athletic Department. **ALL MATERIALS MUST BE COMPLETED AND RETURNED TO THE ATHLETIC OFFICE.** Scholars must complete all paperwork and meet all eligibility requirements to participate in sports at Heritage Academy.

- ☐ Parent Consent and Emergency Information
- ☐ Code of Conduct
- ☐ Participation Physical Evaluation - Medical History
- ☐ Participation Physical Evaluation – Physical Examination by a Doctor
- ☐ Athletic Participation / Fee Form
- ☐ Transportation Permission
- ☐ CAA Concussion Video / Proof of Insurance
- ☐ Payment - Extracurricular Activity Donation (ECA Tax Credit Form)

- Scholars will not be eligible to compete until a completed athletic packet, athletics physical have been turned in to the athletics office and class fee has been paid.
- Please deliver completed documents into the front office or you may email them to Mr. Miller (jeffrey.miller@heritageacademyaz.com).

New to Heritage Academy: Y ___ N ___ Enrollment date (___ / ___ / ___)

Last school attended: _____

HERITAGE ACADEMY PARENT CONSENT AND EMERGENCY INFORMATION

My signature below indicates my permission for my scholar, _____, to participate in after school sports/activities at Heritage Academy. My signature also indicates that I have read and approve the medical treatment authorization.

EMERGENCY INFORMATION

Student Name: _____ Birthdate: _____ Age: _____

Father's Name: _____ Mother's Name: _____

Day Phone of Parents: Father _____ Mother: _____

Address: _____

Family Doctor: _____ Phone Number: _____

Allergies: _____ In

an emergency, if the parents cannot be reached, please notify:

Name: _____ Phone Number: _____

MEDICAL TREATMENT AUTHORIZATION

In the event of illness or injury occurring to my child while participating in this activity, I hereby give my consent for medical or dental care deemed necessary by the attending health care provider or dentist. My child may be examined and any necessary procedures (medical, dental, or surgical), anesthesia or diagnostic procedures (lab or x-ray) may be performed under the supervision of a member of the hospital or medical office staff furnishing such services.

I understand that, in the event of other than minor illness or injury, reasonable effort will be made to contact me.

I understand that there is inherent risk in many activities, and I hold Heritage Academy harmless and not liable for injury or accident, which may occur in the course of such activities. I willingly and ultimately assume the risk of such injury or accident.

Parent/Guardian Name: _____

Signature: _____

Date: _____

Heritage Academy Charter School

Code of Conduct for Scholars and Parents

Participating in an athletic program at Heritage Academy is a privilege. With this privilege, scholar athletes are expected to adhere to a high standard of behavior. All scholar athletes shall abide by a code of ethics that will earn them the honor and respect that participation and competition affords. It is important for our athletes to realize they represent their families, the school and the community at all times. Scholar athletes act as role models for the younger scholars. Scholar athletes have a commitment to their teammates and coaches to be at their best physically, mentally and academically at all times.

Scholar athletes should promote a healthy lifestyle by not using any illegal or unhealthy substances including alcohol, tobacco and drugs or engage in any unhealthy techniques to gain, lose or maintain weight. It is expected that scholar athletes adhere to the Code of Conduct at all times, not just during the sport season.

It is important that a scholar athlete realizes the great sacrifice by coaches, teammates, teachers, family and others in your behalf. Your gratitude is expressed by your respect!

Heritage academy issues a Scholar handbook that can be obtained from the front office or found online at www.hamaricopa.com

It is expected that all scholar athletes will respect and comply with the rules of Heritage Academy.

Scholar Athlete

ATHLETES MUST AGREE TO:

- Follow the guidelines for dress and grooming in the scholar handbook.
- Be to practice and games on time.
- Be responsible for any equipment and uniform issued to them and returning it as requested at the designated time and place. Scholar will be charged replacement value for misused, abused or lost equipment.
- Be respectful and encouraging towards your teammates. Do not belittle them for their mistakes or abilities. Be encouraging they are working hard too.
- Take responsibility to your academic eligibility and the tools to help you stay on track which will be offered by the coach.
- Help other teammates who may struggle in classes you excel in.
- Listen to your coaches while they are talking to you or another player. We do not want to talk over you.
- Not use or possess illegal substances including tobacco, alcohol, marijuana or drug paraphernalia.
- Notify one of the coaches of any teammate that might be struggling with issues contrary to our team standards.

Parents

PARENTS MUST AGREE TO:

- Support your scholar by ensuring their adherence to the dress and grooming standards at Heritage Academy.
- Have their athlete on time to practices and games.
- Help your athlete keep track of and in good condition any equipment and uniform issued to them. Replacement costs are not part of the participation fees.
- Not encourage belittling conversation towards players, coaches, and officials. Your comments are welcomed at the appropriate time.
- Cheer from the designated areas. Please let the coach do the coaching. At no time are parents or fans to engage with the opposing players, parents, or referees in any negative manner. Parents attending any games represent Heritage as well.
- Share with the coach any concerns you might have about your athlete regarding sports, academics, or anything you feel would better help us understand him/her. We are a team-family. We want them to succeed
- Please respect the following times Pre-game (30 minutes before the game), the game (1st and 2nd halves), and post game (30 minutes after the game). This is NOT a good time for coaches to talk. Please allow 24 hours before approaching a coach with game time concerns.

Parent signature: _____ Athlete signature: _____ Date _____

Athletic Participation/Fee Form

Student Name: _____ Grade: _____

I understand that Heritage Academy is not ensuring my student under any health or accident insurance program, and that my student's participation is covered only under whatever insurance program I have in place. I further understand that Heritage Academy disclaims any financial responsibility for the costs of medical treatment, hospitals, ambulances, paramedics, etc. arising out of or by virtue of any injury to my student while participating in interscholastic sports.

"With regard to sports, the payment of fees is not contingent upon the scholar's playing time on a particular team, because whether or not a scholar gets to play, money has been expended for the class. Every effort is made to ensure that every scholar will play on a team, whether it is playing another school (interscholastic) or playing another team at the school (intramural)" (Scholar/Parent Handbook, pg 8). Fees used towards the ECA tax credit cannot be refunded. Fees for all Fall sports are due by **August 15, 2025**. All Athletic Packet paperwork, current sports physical, concussion certificate and fees are due for fall sports scholar-athletes by **August 15, 2025**.

Participation on an athletic team or in a sports class at Heritage Academy-Maricopa is a privilege. The Athletic Department reserves the right to drop any athlete out of the program if they see necessary without a refund. The Heritage PE uniform which can be purchased through the school's vendor, is required for all athletes to wear during 4th hour. Game uniforms/jerseys are only to be worn on game/meet days. Please visit: www.hamaricopa.com/athletics frequently for updates and more details and information.

This sports fee is to cover the duration of the league's sports season(s) only. Before a sport season begins or once a sport season has ended, your scholar athlete will have the option to participate in a different sport or be transferred into a PE class specific to sports conditioning to fulfill their PE credit requirement for the semester. As long as there are enough scholar athletes registered and cleared to participate in a particular sport, the Heritage Academy Maricopa Athletic Department will make every effort to provide quality coaching during the season of play and for the skill level of the athletes on a particular team and an opportunity to compete in some fashion either in an interscholastic or intramural experience.

Fee for non-returned uniforms/jersey/equipment. A minimum fee of \$50 will be assessed for any uniforms and jerseys which are not returned at the conclusion of the sports season and the fee may be higher for player equipment which is checked out to the athlete at the beginning of the season and not returned at the conclusion of the season. The equipment fee will depend on cost to replace the piece(s) of equipment.

Class Fees: In addition to my approval for participation in interscholastic or intramural sports, I understand that the payment of a participation fee is necessary for Heritage Academy to continue offering a worthy sports program. The payment fee does not guarantee that my athlete will participate in every or any scheduled competition. I understand that the participation fee allows my student to take part as a member of the class. I further understand that if my student withdraws prior to the first game, one half of the participation fee will be refunded. However, athletes who quit or are injured after the first game, are not academically eligible to participate or are dismissed for disciplinary reasons at any time will have no portion of the participation fee refunded. There will also be no refunds after the first 3 weeks of classes for each semester respectively.

Parent Signature: _____ Date: _____

TRANSPORTATION PERMISSION SLIP

This permission slip is intended to cover Heritage Academy scholars that ride on Heritage Academy provided transportation. This transportation allows scholars to participate in elective courses being held on campus and as a relief to parents from the burden of transporting their students to games and events.

My scholar, _____, has my permission to be transported to and from Heritage classes, games, and events on Heritage Academy provided transportation. I understand that such transportation may be in rented cars, vans, private vehicles, and/or chartered buses. It is understood that every necessary precaution will be taken to ensure students' safety. Beyond this, I agree to hold Heritage Academy harmless in the event of any injury to my scholar while s/he is participating in off campus activities.

Parent/Guardian Name: _____ Phone: _____

Signature: _____ Date: _____

STUDENT DRIVING/RIDING IN PRIVATE VEHICLE

Transportation to and from activities may be provided by private vehicle or walking. I understand that in some cases students may be driving their own vehicles to and from games, practices, or other Heritage Academy events. In the event that alternative private transportation is used in lieu of transportation provided by Heritage Academy, Heritage Academy has no responsibility for the conduct of the driver/vehicle and has no responsibility for ensuring that the driver of the vehicle has accurate insurance and/or license.

In the event that a scholar uses alternative or private transportation, I agree to one of the following:

I give my permission for my son/daughter to drive a private vehicle to and from activity.

I give my permission for _____ to ride in a private vehicle driven by _____
Riding Student's Name(s) Driving Student's or Parent's Name
to and from activity.

Parent/Guardian Name: _____ Phone: _____

Signature: _____ Date: _____

Note: Before any scholar is permitted to participate in Heritage Academy activities requiring school transportation, this permission form must be signed and returned. NO EXCEPTIONS.

CAA Concussion

This is to confirm that I have watched and completed the **Concussion in Sports** training video required by Heritage Academy and the CAA (Canyon Athletic Association). This is necessary in order for the athlete named below to participate in any competitive sporting events offered through the CAA. This must be completed once in JH and once in HS.

<https://learn.barrowneuro.org/courses/brainbook-30-english>

Athlete's Name: _____ Date: _____

Completion Date: _____ Completion Code: _____
(found on the certificate) (found on the certificate)

Proof of Medical Insurance Form

Proof of Health/Accident/Hospitalization Insurance

Name of Insurance Company _____

Address of Insurance Company _____

Policy Number _____

Group Number _____

Other Policy Identifying Number(s) _____

Name of Insured _____

Relationship to student _____

Expiration Date or terms regarding when coverage will cease _____

I hereby certify that the above information is complete and accurate to the best of knowledge. I understand that if any of this information is to change I must notify Heritage Academy to update my students file.

Name of Student (please print) _____

Parent's Signature _____ Date _____

Extracurricular Activity Donation

Phone No. _____

Contributor/Taxpayer _____

Email address: _____

Address _____

STREET

CITY

STATE

ZIP CODE

May give activity and/or student (Optional)

Amount

Tax year _____ **Total Amount Contributed**  _____

The above payment is eligible for the Arizona state income tax credit as allowed by Arizona Revised Statute §431089.01. The tax credit is limited to \$400 for married couples and \$200 for individuals. A receipt will be emailed or mailed to you for tax purposes. **Tax credit donations are nonrefundable by the school.**

Due date: Beginning in 2016, tax payers can make tax donations from January 1 up until April 15 of the following year.

Donations made between January 1 and April 15 must be designated as to which tax year the donation applies. For example, a donation made in April 2016 can be applied to either 2015 or 2016.

Paying online by credit or debit card: Go to our website: **www.hamaricopa.com** and click on "Parents" on the QuickLinks Red banner. Then click on payments. Enter the information on the scholar or activity and the donor information and then you will be able to pay with a paypal account or a credit or debit card.

Heritage Academy will make every effort to ensure that donations are used for the activity indicated as priority. However, in the unlikely event that an activity is canceled or receives more funding than is needed, the school will use your donation for another worthwhile activity that directly benefits students. If no activity is listed, the school will determine the extracurricular activity of greatest benefit. Be assured your donations will not fund recreational, amusement or tourist side trips.

For answers to any questions, please contact the school at 520-367-3800.