



# Meridian Public Schools

## The Hoof Print - Home of the Mustangs

### Mission Statement:

Meridian Public Schools will educate all students in a safe, nurturing environment while challenging them to develop their integrity, knowledge, and unique talents to become responsible, productive citizens.

Newsletter

[www.meridianmustangs.org](http://www.meridianmustangs.org)

July, 2022

Newsletter - July, 2022  
Superintendent  
Randy Kort

As I am writing this, we have the wheat turning and getting ready to be cut. The corn and beans are looking good and we have thankfully been missing the hail. The students have been attending weights in the morning, camps during the day, and staying busy with summer activities. It is hard to believe, but we are going to be back in school in about 7 weeks.

During summer break, we have sanded and polished the gym floor and have also updated the stage lights and sound system.

Everyone please enjoy your Fourth of July and have some great family time.

All student athletes please get your physicals completed by the first of August and submitted to Trish.

### **BUSING**

Parents will be notified of the busing times and routes in early August.

### **SCHOOL WEBSITE**

Stay updated with the District news by visiting the Meridian Public Schools website ([www.meridianmustangs.org](http://www.meridianmustangs.org))

**Board of Education  
Meridian Public Schools  
District - 48-0303  
Daykin, Nebraska, 68338  
Monday, June 20, 2022**

**Regular June 20, 2022 Meeting  
6:00 P.M.**

Meridian Public School Board of Education met on June 20, 2022, as per notice in the Fairbury Journal-News.

President Bartels called the meeting to order at 6:05 p.m. The open meeting law information was presented.

Roll call was taken: Vorderstrasse - present, Niederklein - present, Sobotka - present, Rut - present, Scheer - present, and Bartels - present. Also present were Superintendent Kort, Principal Scott and Clint Jones.

Nothing new was added to the agenda.

During the public comments, Brian Rut spoke on behalf of Jay and Staci VanWesten. The VanWesten's would like to donate a "Meridian FFA Welcomes You" sign to be posted near the school.

Sobotka moved and Niederklein seconded to approve the consent agenda as presented.

- A. Minutes of Monday, May 16, 2022, Regular Meeting
- B. District Financial Report
- C. Activity Fund Report
- D. Hot Lunch Fund Report
- E. Bills

Vote taken: Vorderstrasse - aye, Niederklein - aye, Sobotka - aye, Rut - aye, Scheer - aye, and Bartels - aye. Motion passed 6-0.

Curriculum report:

- Updates to the English/Language Arts curriculum will create more balanced learning between vocabulary & writing and fiction & non-fiction.

Sobotka moved and Rut seconded to approve Dana Cole as the auditors for the 2021-2022 school year. Vote taken: Vorderstrasse - aye, Niederklein - aye, Sobotka - aye, Rut - aye, Scheer - aye, and Bartels - aye. Motion passed 6-0.

Mr. Kort presented proposed school lunch prices for the 2022-2023 school year. Lunch prices have remained the same for the past five years. Current prices are:  
Breakfast: Elementary - \$1.30, 7-12 grade - \$1.55, Adult - \$2.00  
Lunch: Elementary - \$2.60, 7-12 grade - \$2.70, Adult - \$3.50

Vorderstrasse moved and Scheer seconded to keep the breakfast and lunch prices the same as they have been. Vote taken: Vorderstrasse - aye, Niederklein - aye, Sobotka - aye, Rut - aye, Scheer - aye, and Bartels - aye. Motion passed 6-0.

Mr. Kort presented the yearly contract for Southeast Nebraska Regional Program Interlocal Agreement for the Deaf or Hard of Hearing. Niederklein moved and Vorderstrasse seconded to approve the yearly contract for the SNRP Deaf or Hard of Hearing Agreement. Vote taken: Vorderstrasse - aye, Niederklein - aye, Sobotka - aye, Rut - aye, Scheer - aye, and Bartels - aye. Motion passed 6-0.

Policy 5000s were reviewed at the May board meeting. Scheer moved and Niederklein seconded to approve the Policy 5000s. Vote taken: Vorderstrasse - aye, Niederklein - aye, Sobotka - aye, Rut - aye, Scheer - aye, and Bartels - aye. Motion passed 6-0.

Mr. Kort presented the 2022 Census Report to the Board. Rut moved and Niederklein seconded to approve the 2022 Census. Vote taken: Vorderstrasse - aye, Niederklein - aye, Sobotka - aye, Rut - aye, Scheer - aye, and Bartels - aye. Motion passed 6-0.

Mr. Kort proposed to the Board the purchase of an enclosed trailer. The trailer would be used primarily for the band and drama departments. He will provide more information in the near future.

Principal's Report:

- 2022-2023 Student counts - 114 in elementary, 100 in high school, 1 exchange student for a total of 214 students.
- Mr. Scott attended the Meridian Alumni banquet in Tobias on June 4, presenting highlights from the 2021 - 2022 school year.
- Summer school is in full swing. Two teachers are working with 18 students on math and reading skills.



- The annual non-public Title parent meeting was held on Tuesday, June 7. We had a new family to the area attend to get information about potential services.
- Meridian staff attended the ESU5 Services planning day. This provided an opportunity to discuss services that can be provided to the school district through the ESU.
- The competition gym has been sanded and prepped for the new year.
- Meridian held a basketball camp the week of June 13.
- Stage lights and sound are scheduled to be installed the week of June 20.
- FBLA National Leadership Conference is scheduled for June 30-July 2 in Chicago. Brynn Holtmeier will be representing Meridian.

Superintendent's Report:

- Summer Projects Update
  - The sanding and updating of the competition gym floor has been completed.
  - Painting the ceiling in the commons and touch up painting are yet to be completed.
  - Classrooms are being emptied out and cleaned up.
- Summer weights are underway. Girls attend on Monday, Tuesday & Thursday and boys on Monday, Wednesday & Friday.
- Basketball camp was hosted at Meridian this past week.
- NASB will no longer be part of the National School Board Association.
- Potential Board Retreat dates.

The next Regular Meeting was set for Thursday, July 14, 2022, at 5:00 p.m. followed by a Board retreat at Kerry's in McCool Junction.

Sobotka moved and Vorderstrasse seconded to adjourn at 6:43 p.m. Vote taken: Vorderstrasse – aye, Niederklein – aye, Sobotka – aye, Rut – aye, Scheer – aye, and Bartels – aye. Motion passed 6-0.

*Jamie Niederklein,*

Secretary Meridian District #48-0303



As of June 28, 2022

	2021-2022	2022-2023
PreK	6	8
Kindergarten	21	11
1 <sup>st</sup>	16	21
2 <sup>nd</sup>	10	17
3 <sup>rd</sup>	17	11
4 <sup>th</sup>	16	17
5 <sup>th</sup>	12	16
6 <sup>th</sup>	<u>15</u>	<u>13</u>
	113	114
7 <sup>th</sup>	13	17
8 <sup>th</sup>	17	14
9 <sup>th</sup>	18	18
10 <sup>th</sup>	11	19
11 <sup>th</sup>	19	11
12 <sup>th</sup>	<u>15</u>	<u>19</u>
	93	98
Exchange	<u>3</u>	<u>1</u>
	96	99
<b>Grand Total</b>	209	213

NSAA 9<sup>th</sup>-11<sup>th</sup> count – (anticipated this year 48)(Last year 49) (2 years 49)(3 years 51)(4 years 58)(5 years 60)(6 years 67)(7 years 59)(8 years 46)

Mr. Scott attended the Meridian Alumni banquet in Tobias on June 4, presenting highlights from the 2021-22 school year.

Summer school is in full swing. Two teachers are working with 18 students on math and reading skills. Summer school met on Tuesdays and Wednesdays during June, and will finish classes on the 19th of July.

The annual non-public Title parent meeting was held on Tuesday, June 7. We had a new family to the area attend to get information about potential services.

Meridian staff attended the ESU5 Services planning day. This provided an opportunity to discuss services that can be provided to the school district through the ESU.

The competition gym has been sanded and prepped for the new year.

Meridian held a basketball camp the week of June 13. Students from the upcoming 4th grade to seniors

attended. Not only were our student athletes able to hone their basic skills, they had fun while they were at it. Thank you Coach Pohlmann and Coach Hofstetter for spending time to help our athletes become better players.

Yandas of Kearney were here the week of June 20 to install the stage lights and sound system. On Friday, June 24, staff members were taught how to operate the new system. Meridian will enjoy quality lighting and sound for years to come.

FBLA National Leadership Conference was scheduled for June 30 through July 2 in Chicago. Brynn Holtmeier is representing Meridian.

2022-2023 PHYSICALS

Jefferson Community Health and Life Fairbury Clinic will be offering sports physicals to students of any grade by appointment. On May 26th, June 23rd, and July 28th from 4:40 p.m. to 7:00 p.m., Fairbury Clinic is offering evening appointments. If you would like to take advantage of the evening schedule, please call 402-729-3361 and make your appointment. Kindergarten, 7th Grade, foreign exchange students, and students who move to our district from out of state are also required to have Nebraska physicals and State school immunization requirements must be met. In addition to a physical, Kindergarten, foreign exchange students, and students who move to our district from out of state will need an eye exam. Please call 402-729-3361 to schedule your appointment. Physicals must be completed before August 1, 2022. **Students must bring all forms with their name and date of birth on each as indicated - including the medical history form. These forms also require a signature by a parent or guardian. If a student comes to their appointment without completed forms, they will need to reschedule their physical.**

The price of each physical without insurance will be \$85 with an additional \$34 charge if a urine sample is required (7th Grade and Kindergarten). If you would like this ran through your insurance as a Well Child Check, make sure you have not submitted a Well Child Check within a year and notify the clinic at the time of scheduling. If urine is required, please pick up a sterile cup from the clinic ahead of time.



Physical forms can be found at the back of this newsletter, at the District Office of Meridian Public Schools, or on the NSAA website (nsaa.home). **Please fill out all of the attached forms. You need to include a signed NSAA Parent and Student Consent form when you turn your physicals in to the school. Student athletes are NOT allowed to play without a completed consent form on file at the school.**

### 150TH CELEBRATION

Alexandria, Nebraska was founded 150 years ago. The town is holding a celebration on August 27th, 2022. There will be events throughout the day for everyone to enjoy. More information will be forthcoming as it becomes available.

### DAYKIN COMMUNITY GARAGE SALES

The 2022 Daykin Community Garage Sales have been scheduled for Thursday, August 11 (4 pm - 8 pm), Friday, August 12 (8 am - 8 pm), and Saturday, August 13 (8 am - noon). Maps with locations and items for sale will be printed by August 1st. If you are interested in participating, please contact Mary Heidemann at 402-587-0177 by then. The maps and sale bills will be available at the Daykin Country Store and all participating locations. There is no fee for participation.



# 2022-2023 MERIDIAN SCHOOL SUPPLY LIST

## Pre-K

- ◇ 1 Box of Kleenex
- ◇ 1 Containers of Disinfectant Wipes
- ◇ Book Bag
- ◇ 1 - 30" x 54" Bath Towel (for quiet time)
- ◇ Non-Marking Gym Shoes with Velcro or Elastic Straps
- ◇ 1 Complete change of clothes in a plastic bag labeled with the child's name to be kept at school in case of accidents or spills.

**Optional:**

- ◇ Water Bottle
  - ◇ Light Jacket or Sweater for Use in Classroom
  - ◇ 1 Bottle Hand Sanitizer OR 1 Container Baby Wipes - for Hands and Face
- Please put your child's initials on the items they bring.*

## 2nd Grade

- ◇ Pencils
- ◇ Eraser
- ◇ Crayons (24 - 48 Count)
- ◇ Markers
- ◇ 1 Box of Facial Tissue
- ◇ Scissors
- ◇ Book Bag
- ◇ P.E. Shoes (no dark sdes)
- ◇ 1 Pocket Folder
- ◇ Paint Shirt
- ◇ 2 Containers Clorox Wipes
- ◇ Pencil Box or Container (make sure it will fit in your desk)

**Optional:**

- ◇ Colored Pencils
  - ◇ Ruler
  - ◇ Glue Sticks
  - ◇ Earbuds
  - ◇ 1 Hand Sanitizer
- Please do not send personal pencil sharpeners as electric sharpeners are provided in the classroom.*

## 5th Grade

- ◇ #2 Wooden Pencils and Eraser
- ◇ 1 Jumbo Book Cover
- ◇ 3 Boxes Facial Tissue
- ◇ 3 70-Page Count Notebooks
- ◇ 2 Pocket Folders
- ◇ 1 Set of Dry Erase Markers with Eraser
- ◇ PE Shoes - Non-Marking
- ◇ 100 Sheet Loose Leaf Paper
- ◇ Student Planner

## Kindergarten

- ◇ 2 Boxes of Facial Tissue
- ◇ Non-Marking Gym Shoes - Velcro PLEASE
- ◇ Backpack/Book Bag
- ◇ 3 Large Containers Disinfectant Wipes OR 2 Spray Bottles Cleaner/Disinfectant (*It is helpful to send paper towels if you buy spray*).
- ◇ 1 Complete change of clothes in a plastic bag labeled with the child's name to be kept at school in case of accidents or spills.
- ◇ 1 Paint Smock - Plastic/Vinyl (if possible)

**Optional:**

- ◇ Small travel pillow if your child wants one for rest time. **This will only be used the FIRST QUARTER.**
- Please label items you send with your child's name.*
- Please DO NOT send your child in tie shoes (especially for PE) if they are unable to tie their own shoes. We work on this skill, but it is difficult to have one person tie several pairs of shoes multiple times per day.*

## 3rd Grade

- ◇ 4 Glue Sticks
  - ◇ Pencil Case or Box
  - ◇ 2 Yellow Highlighters
  - ◇ Pencils
  - ◇ Erasers
  - ◇ Markers
  - ◇ 5-10 Dry Erase Markers (any color)
  - ◇ Colored Pencils
  - ◇ Scissors
  - ◇ Backpack/Book Bag
  - ◇ 2 Pairs Ear Buds
  - ◇ Paint Shirt
  - ◇ P.E. Shoes (no dark soles)
  - ◇ Boxes of Tissue
  - ◇ Germ-X
  - ◇ Clorox Wipes
- Please do not send personal pencil sharpeners as electric sharpeners are provided in the classroom.*

## 6th Grade

- ◇ 12 Pencils
  - ◇ Eraser
  - ◇ Book Bag
  - ◇ PE Shoes – NON-MARKING
  - ◇ 5 Pocket Folders
  - ◇ Dry Erase Markers
  - ◇ 1 Trapper/Keeper
  - ◇ 2 Highlighters
  - ◇ 2 Boxes Facial Tissue
- Optional:**
- ◇ Earbuds/Headphones

## 1st Grade

- ◇ #2 Pencils
  - ◇ Crayola Crayons (24 Count ONLY)
  - ◇ 2-3 Large Erasers
  - ◇ Scissors
  - ◇ 1 Pencil Box or Bag
  - ◇ Crayola Markers
  - ◇ 2-3 Large Boxes of Facial Tissue
  - ◇ 1 Container Clorox Wipes
  - ◇ 4 Jumbo Glue Sticks
  - ◇ Headphones
  - ◇ 1 Pocket Folder
  - ◇ 1 Single Subject Wide Ruled Spiral Notebook
  - ◇ Book Bag
  - ◇ Non-Marking Gym Shoes
  - ◇ Paint Shirt
- Please label items you send with your child's name.*

**Please do not send personal pencil sharpeners as electric sharpeners are provided in the classroom.**

## 4th Grade

- ◇ 1 Box Facial Tissue
- ◇ 1 Pocket Folder
- ◇ 1 Pencil Pouch or Box
- ◇ Earbuds
- ◇ #2 Pencils
- ◇ 2 Wide Ruled Notebooks
- ◇ 1 Clorox Wipes
- ◇ 2 Large Erasers
- ◇ 1 Set of Water Colors
- ◇ Non-Marking PE Shoes

## 7th Grade Science

- ◇ 1 - 3-Ring Binder or Folder

## 7th - 12th Grade Math Classes

- ◇ Scientific Calculator (If your child does not own a scientific calculator, please consider buying them one for the upcoming school year. A preferred calculator among many of the students is a Texas Instruments (TI-30XIIS.)

## ALL HIGH SCHOOL STUDENTS

- ◇ 1 Box Facial Tissue



**PREPARTICIPATION PHYSICAL EVALUATION**

**HISTORY FORM**

Note: Complete and sign this form (with your parents if younger than 18) before your appointment.

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Date of examination: \_\_\_\_\_ Sport(s): \_\_\_\_\_

Sex assigned at birth (F, M, or intersex): \_\_\_\_\_ How do you identify your gender? (F, M, or other): \_\_\_\_\_

List past and current medical conditions. \_\_\_\_\_

Have you ever had surgery? If yes, list all past surgical procedures. \_\_\_\_\_

Medicines and supplements: List all current prescriptions, over-the-counter medicines, and supplements (herbal and nutritional). \_\_\_\_\_

Do you have any allergies? If yes, please list all your allergies (ie, medicines, pollens, food, stinging insects). \_\_\_\_\_

Patient Health Questionnaire Version 4 (PHQ-4)  
*Over the last 2 weeks, how often have you been bothered by any of the following problems? (Circle response.)*

	Not at all	Several days	Over half the days	Nearly every day
Feeling nervous, anxious, or on edge	0	1	2	3
Not being able to stop or control worrying	0	1	2	3
Little interest or pleasure in doing things	0	1	2	3
Feeling down, depressed, or hopeless	0	1	2	3

(A sum of ≥3 is considered positive on either subscale [questions 1 and 2, or questions 3 and 4] for screening purposes.)

GENERAL QUESTIONS (Explain "Yes" answers at the end of this form. Circle questions if you don't know the answer.)			Yes	No
1. Do you have any concerns that you would like to discuss with your provider?				
2. Has a provider ever denied or restricted your participation in sports for any reason?				
3. Do you have any ongoing medical issues or recent illness?				
HEART HEALTH QUESTIONS ABOUT YOU			Yes	No
4. Have you ever passed out or nearly passed out during or after exercise?				
5. Have you ever had discomfort, pain, tightness, or pressure in your chest during exercise?				
6. Does your heart ever race, flutter in your chest, or skip beats (irregular beats) during exercise?				
7. Has a doctor ever told you that you have any heart problems?				
8. Has a doctor ever requested a test for your heart? For example, electrocardiography (ECG) or echocardiography.				

HEART HEALTH QUESTIONS ABOUT YOU (CONTINUED)			Yes	No
9. Do you get light-headed or feel shorter of breath than your friends during exercise?				
10. Have you ever had a seizure?				
HEART HEALTH QUESTIONS ABOUT YOUR FAMILY			Yes	No
11. Has any family member or relative died of heart problems or had an unexpected or unexplained sudden death before age 35 years (including drowning or unexplained car crash)?				
12. Does anyone in your family have a genetic heart problem such as hypertrophic cardiomyopathy (HCM), Marfan syndrome, arrhythmogenic right ventricular cardiomyopathy (ARVC), long QT syndrome (LQTS), short QT syndrome (SQTS), Brugada syndrome, or catecholaminergic polymorphic ventricular tachycardia (CPVT)?				
13. Has anyone in your family had a pacemaker or an implanted defibrillator before age 35?				





■ PREPARTICIPATION PHYSICAL EVALUATION

ATHLETES WITH DISABILITIES FORM: SUPPLEMENT TO THE ATHLETE HISTORY

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

1. Type of disability:		
2. Date of disability:		
3. Classification (if available):		
4. Cause of disability (birth, disease, injury, or other):		
5. List the sports you are playing:		
	Yes	No
6. Do you regularly use a brace, an assistive device, or a prosthetic device for daily activities?		
7. Do you use any special brace or assistive device for sports?		
8. Do you have any rashes, pressure sores, or other skin problems?		
9. Do you have a hearing loss? Do you use a hearing aid?		
10. Do you have a visual impairment?		
11. Do you use any special devices for bowel or bladder function?		
12. Do you have burning or discomfort when urinating?		
13. Have you had autonomic dysreflexia?		
14. Have you ever been diagnosed as having a heat-related (hyperthermia) or cold-related (hypothermia) illness?		
15. Do you have muscle spasticity?		
16. Do you have frequent seizures that cannot be controlled by medication?		

Explain "Yes" answers here.

\_\_\_\_\_  
\_\_\_\_\_

Please indicate whether you have ever had any of the following conditions:

	Yes	No
Atlantoaxial instability		
Radiographic (x-ray) evaluation for atlantoaxial instability		
Dislocated joints (more than one)		
Easy bleeding		
Enlarged spleen		
Hepatitis		
Osteopenia or osteoporosis		
Difficulty controlling bowel		
Difficulty controlling bladder		
Numbness or tingling in arms or hands		
Numbness or tingling in legs or feet		
Weakness in arms or hands		
Weakness in legs or feet		
Recent change in coordination		
Recent change in ability to walk		
Spina bifida		
Latex allergy		

Explain "Yes" answers here.

\_\_\_\_\_  
\_\_\_\_\_

I hereby state that, to the best of my knowledge, my answers to the questions on this form are complete and correct.

Signature of athlete: \_\_\_\_\_

Signature of parent or guardian: \_\_\_\_\_

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



PREPARTICIPATION PHYSICAL EVALUATION

PHYSICAL EXAMINATION FORM

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

PHYSICIAN REMINDERS

- 1. 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, e-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-enhancing 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?
2. Consider reviewing questions on cardiovascular symptoms (Q4-Q13 of History Form).

Table with columns: EXAMINATION, MEDICAL, MUSCULOSKELETAL, NORMAL, ABNORMAL FINDINGS. Rows include: Height, Weight, BP, Pulse, Vision, Corrected, Appearance, Eyes, Lymph nodes, Heart, Lungs, Abdomen, Skin, Neurological, Neck, Back, Shoulder and arm, Elbow and forearm, Wrist, hand, and fingers, Hip and thigh, Knee, Leg and ankle, Foot and toes, Functional.

\* Consider electrocardiography (ECG), echocardiography, referral to a cardiologist for abnormal cardiac history or examination findings, or a combination of those.

Name of health care professional (print or type): \_\_\_\_\_ Date: \_\_\_\_\_

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

Signature of health care professional: \_\_\_\_\_, MD, DO, NP, or PA

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I hereby give permission for the release of the attached student medical history and the results of the actual physical examination to the school for the purposes of participation in athletics and activities.
Parent or Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_





■ PREPARTICIPATION PHYSICAL EVALUATION

MEDICAL ELIGIBILITY FORM

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

- Medically eligible for all sports without restriction
- Medically eligible for all sports without restriction with recommendations for further evaluation or treatment of

\_\_\_\_\_  
\_\_\_\_\_

- Medically eligible for certain sports

\_\_\_\_\_  
\_\_\_\_\_

- Not medically eligible pending further evaluation

- Not medically eligible for any sports

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

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

Name of health care professional (print or type): \_\_\_\_\_ Date: \_\_\_\_\_

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

Signature of health care professional: \_\_\_\_\_, MD, DO, NP, or PA

SHARED EMERGENCY INFORMATION

Allergies: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Medications: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Emergency contacts: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



To be completed for Students participating in any NSAA activities.

Student and Parent Consent Form



School Year: 20\_\_-20\_\_
Member School:
Name of Student:
Date of Birth: Place of Birth:

The undersigned(s) are the Student and the parent(s), guardian(s), or person(s) in charge of the above-named Student and are collectively referred to as "Parent".

The Parent and Student hereby:

- (1) Understand and agree that participation in NSAA sponsored activities is voluntary on the part of the Student and is a privilege;
(2) Understand and agree that (a) by this Consent Form the NSAA has provided to the Parent and Student of the existence of potential dangers associated with athletic and activity participation;
(3) Consent and agree to participation of the Student in NSAA activities subject to all NSAA Bylaws and rules interpretations for participation in NSAA sponsored athletic and/or activities;
(4) Consent and agree to (a) the disclosure by the Member School at which the Student is enrolled to the NSAA, and subsequent disclosure by the NSAA, of information regarding the Student;
(5) Consent and agree to authorize licensed sports injury personnel to evaluate and treat any injury or illness that occurs during the Student's participation in NSAA activities;
(6) Acknowledge that Parents are obligated to pay for professional medical and/or related services; the NSAA shall not be liable for payment of such services.

I acknowledge that I have read paragraphs (1) through (6) above, understand and agree to the terms thereof, including the warning of potential risk of injury inherent in participation in athletics and activities.

Name of Student [Print Name] Student Signature Date

(I am)(We are) the Student's [circle appropriate choice] (Parent) (Guardian). (I)(We) acknowledge that (I)(We) have read paragraphs (1) through (6) above, understand and agree to the terms thereof, including the warning of potential risk of injury inherent in participation in athletics and activities. Having read the warning in paragraph (2) above and understanding the potential risk of injury to my Student, (I)(we) hereby give (my)(our) permission for [insert Student name] to practice and compete for the above named high school in activities approved by the NSAA, except those crossed out below:

Table with 7 columns: Baseball, Basketball, Bowling, Cross Country, Debate, Football, Golf, Journalism, Music, Play Production, Soccer, Softball, Speech, Swim/Dive, Tennis, Track & Field, Unified Bowling, Unified Track & Field, Volleyball, Wrestling

Table with 3 columns: Parent(s)/Guardian Printed Name(s)\*, Parent/Guardian Signature, Date of Signature

\*Both Mother and Father must sign, unless parents are divorced, the custodial parent must sign, or if the Student is not living with parents, the Student's legal guardian.




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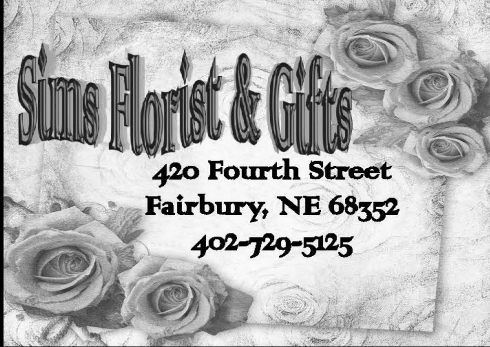
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