



Poudre School District  
2407 LaPorte Ave  
Fort Collins, CO 80521  
970-482-7420

## Colorado High School Activities Association Student Eligibility Information and Anti-Hazing Policy (2022-2023)

\_\_\_\_\_  
Student's Name (Last, First, M.I.)

\_\_\_\_\_  
Student ID#  
(Leave blank if you are not a PSD student)

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

Pursuant to CHSAA Bylaw 1720.1, parents must be informed, understand, and acknowledge basic CHSAA eligibility rules.

In accordance with CHSAA Bylaw 1720.1, I have read, understand and agree to the general eligibility guidelines as outlined in the CHSAA *Competitor's Brochure* found on the CHSAA website at:

[http://www2.chsaa.org/about/pdf/Competitor's\\_Brochure\\_2020\\_2021.pdf](http://www2.chsaa.org/about/pdf/Competitor's_Brochure_2020_2021.pdf)

- Poudre High School, Fort Collins High School and Fossil Ridge High School are currently under Plan A.
- Rocky Mountain High School is currently under Plan B.

A description of each plan is provided in the *Poudre School District Athletic Handbook* under the section titled, "Athletic Program Requirements and Fees." The Handbook can be found on PSD's Athletics webpage at: <https://www.psdschools.org/programs-services/athletics>

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

### **CHSAA Anti-Hazing Policy**

The Colorado High School Activities Association prohibits bullying, hazing, intimidation, or threats. Hazing includes, but is not limited to humiliation tactics, forced social isolation, verbal or emotional abuse, forced or excessive consumption of food or liquids, or any activity that requires a student to engage in illegal activity. I understand that hazing of any type is not permitted in any CHSAA sanctioned activity.

I will not engage in any prohibited conduct. I further understand that it is my responsibility to immediately report any acts of hazing that I become aware of to a sponsor, teacher, counselor, school support staff, coach, or administrator in my school.

By signing this acknowledgement, I affirm my responsibility to prevent and report hazing. I also understand that any violation of this could result in school or team consequences that could include dismissal from the activity or further disciplinary consequences and/or referral to law enforcement.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

This form must be kept on file at the school for a period of one year