**LHS Field Hockey Contract 2016**

**Coach Pavao “Ellie, Coach Metivier (“Senseyng”), Coach Linskey** @MrsPavaoRules

LHS room C-22 www.mrspavao.weebly.com

Coach Pavao’s Cell Phone: 401-529-6738

**Program Specifics:**

The opportunity to be a part of the Lincoln High School field hockey team should not be taken lightly. We are one of the most respected and revered field hockey programs in the Rhode Island Interscholastic Division 1 Field Hockey League. It is a privilege to be part of such a program and we are looking for hard-working, intrinsically motivated student-athletes who are passionate about bettering themselves, their field hockey skills and being part of a team. *The purpose of this program is to instill a love of the sport in each player, push every player to be her best and teach each player how to be part of a competitive culture.*

**Our coaching philosophy:**

 We want players on our team who care about the game and enjoy playing it. We believe that all athletes have the ability to become quicker and more skilled with hard work and dedication. That said, this is a competitive, Division 1, team sport, which means that the team has to come first and **the best players will be given the most playing time**. This doesn’t mean that hard work won’t pay off.

**Our season:**

 Practice times will not be consistent this season for varsity, as we will be able to practice on turf if we keep a flexible schedule. Varsity games will be played on turf, and the JV games will be played on the front field, with one exception. A practice schedule will be forthcoming.

 If practice or a game needs to be cancelled due to weather or for any other reason, Coach Pavao will notify the Athletic Director, Mr. Feinberg, the team captains, post the cancellation on Coach Pavao’s Twitter and website. **Please subscribe to Remind and you will receive a text when practice is cancelled. This is a free and secure service that allows Coach to send a mass text message. Text @lhsfh to the number 81010.** \*You do not need to do this if you are already receiving the LHSFH texts.

\*Parents: Please arrange for your child’s transportation home if you are unable to pick up your child. **According to state law, *the coaches are unable to give your child a ride home***. If rides will be a problem, please speak to other parents and make arrangements. *If your child is consistently left at the school, she may not be able to participate.*

**Bus Policy:**

\*\*\* All students **are required** to take the bus **TO AND FROM** games! All questions/concerns should be addressed to Principal McNamara.

**Team Rules:**

1. **All students must following all guidelines outlined in the Athletic Handbook and LHS student handbook.** Failure to do so will result in your inability to be part of the team.
2. **Bullying/hazing will not be tolerated.** Bullying and/or hazing is unacceptable behavior.
3. **Practices and games are mandatory for all players.** Please do not miss practice for any reason other than illness. If you must stay after school to meet with a teacher, please bring a note for Coach Pavao excusing your lateness to practice. ACADEMICS COME FIRST, but with that said, try to arrange to come before school to meet with teachers OR arrange to meet with teachers on a day when practice or games are later.
	* ***A missed practice will result in a loss of 10 minutes of playing time!***

 **Keep in mind the attendance policy in the Athletic Handbook:**

* + *Students are expected to be in school during the whole day when a club or activity meets after school. Students must be in class by 7:30 AM. Students missing school for reasons other than illness must be excused in advance of the absence in order to participate. Students absent from school on Friday or a day preceding a holiday and/or a weekend event are ineligible to participate unless the absence is excused in advance by the Principal or his designee. If tardy to school, students must check in at the center no later than* ***9:30 AM to be eligible.***
1. You will come to practice on time, prepared to play (ie; no jewelry or skin showing, with all necessary equipment).

***Practice and Game Locations:***

Visit RIIL.org for complete game schedule and locations of fields. JV will play after varsity, unless it is a night game, then they will play 1 hour and fifteen minutes before the varsity start time.

***Necessary Materials:***

 As part of the team, you will be provided with a uniform. But you MUST always bring the following items with you to practice and games:

1. Any medication you may need (ex/ EPI Pen, inhaler, etc).
2. TWO molded mouth guards
3. Goggles

 *Rhode Island law stipulates that you CANNOT play without a mouth guard and goggles- even in practice!*

1. Shin guards (field hockey shin guards, not soccer and they should be HARD PLASTIC)
2. A water bottle
3. Your stick

**Field Hockey Contract Sign-off Sheet**

**This is a contract between the coach, student, and parent/guardian. Please fill out this sheet accordingly return this sheet to Coach Pavao by MONDAY, 8/29.**

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By signing below, I acknowledge that I have read and understand the policies and procedures detailed in this document.

Player’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Player’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Player’s Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** if you aren’t already receiving e-mails from me

Parent/Guardian name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** if you aren’t already receiving e-mails from me.

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

***In case of emergency, I should contact:***

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Home#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to player: \_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Home#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to player: \_\_\_\_\_\_\_\_

***In the space below, please list any allergies and/or medical information that I should know:***