



# PARSIPPANY TROY-HILLS PUBLIC SCHOOLS

*Athletic Department  
Parsippany, NJ 07054*



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**TO:** Parsippany Hills and Parsippany High School Winter Athletic Parents  
**FROM:** Mr. Richard Fonti and Mr. Todd Ricker  
**DATE:** October 11, 2011  
**SUBJECT:** Winter Physical Information

Each student-athlete coming out for a winter season high school athletic team will need to have a few items of paperwork filled out before they will be cleared to participate in practices or contests. Each student-athlete will need to have the following turned in to the school nurse by **Tuesday, November 1, 2011:**

- A. **Yellow Athletic Emergency Medical Information Card**  
(Filled out on both sides and signed by parent/guardian on the front)
- B. **White Parsippany-Troy Hills Certification of Student Athletic Health History Update**  
(If the student's physical is on file in the Health Office and dated after Nov. 28, 2010)  
**\*\* (Please see the school nurse for your last updated physical date)**

**or**

- C. **Athletic Pre-Participation Examination Form**  
(If the last physical was done before November 28, 2010, please complete the following:)
  - a. Part A: Health History Questionnaire (3 pages) (filled in and signed by parent/guardian)
  - b. Part B: Physical Evaluation Form (4 pages) (filled in and stamped by the physician)
- D. **Parsippany Troy-Hills Permission Form and Parent/Student-Athlete Contract for Interscholastic Sports**  
(read and signed by both parent/guardian and student-athlete)
- E. **NJSIAA Steroid Testing Policy**  
(read and signed by both parent/guardian and student-athlete)
- F. **NJSIAA Parent/Guardian Concussion Policy Acknowledgement Form**  
(read and signed by both parent/guardian and student-athlete)

**No student-athlete will be able to practice until all of the above required paperwork has been submitted and approved.**

If you have any questions about the physical process, please call the nurse at your high school. *Parsippany High School* (973) 263-7001 ext. 2302 or *Parsippany Hills High School* (973) 682-2815 ext. 2402.

**\*\*\*IF FORMS ARE NOT TURNED IN BY NOVEMBER 1<sup>ST</sup> STUDENTS WILL NOT BE PERMITTED TO PRACTICE UNTIL CLEARED BY THE DISTRICT MEDICAL EXAMINER AND A CURRENT IMPACT CONCUSSION TEST HAS BEEN VALIDATED.\*\*\***

*"Achieving Athletic & Academic Excellence"*