ATHLETIC INJURY POLICY

In an effort to expedite treatment for injuries and payment of claims we have instituted the following policies:

Holy Family University’s athletic insurance carrier at this time is Bollinger for Academic Life. It is an excess and deductible policy.

1. Every student-athlete is required to have primary health insurance offered through your place of employment, your parent’s employer, or a carrier selected by the Holy Family Certified Athletic Training staff. (NOTE: Full-time college students generally are not covered on their parent’s policy when 23 years of age or older.)

2. Every student-athlete must have an Insurance Information Form, Emergency Contact Form, and Report of Medical History Form filed with the Athletic Training office.

3. Every student-athlete must provide a copy of their insurance card to the Certified Athletic Training Staff.

4. Student-Athletes should carry information (cards and/or forms) concerning their primary health insurance at all times. This is particularly important for away contests and scrimmages.

5. Holy Family Athletic Insurance Information Forms are available in the Athletic Training office.

6. If you visit a physician or health facility, you must have your primary insurance card or form with you.

7. An Athletic Injury Report must be filed with the athletic training office the FIRST class day after an injury. No injury is too small to report! Your optimum physical condition is important to us.

8. It is your responsibility to appear in the Athletic Training office for follow-up treatment, i.e. whirlpool, ice, medication, exercises, etc.

9. Head coaches will receive notification of any missed appointments for treatment or rehabilitation.

10. Failure to adhere to, or attend, scheduled rehabilitation sessions may result in a delay in clearance for participation in athletically-related activities.

11. If a doctor’s appointment is recommended by the Certified Athletic Trainer, the student-athlete must attend the appointment. Refusal to attend a recommended doctor's appointment will require the student-athlete to sign a declination of medical services form.

12. If a student-athlete misses a scheduled doctor’s appointment, his or her head coach will be notified immediately and the student-athlete will be required to explain in writing the reason(s) for failing to attend the appointment.

13. Student-athletes under a physician’s care require the physician’s clearance before returning to athletically-related activity.

14. Dietary supplements contain substances that are banned by the NCAA and NOT permissible for use. Any substances not containing ingredients listed on the NCAA Banned Substance List are used “at your own risk.” For further information to identify banned substances please contact the Certified Athletic Trainer.

Keep the Athletic Training office informed of all payments and bills related to your sports injury.

Thank you for your cooperation.

I, ____________________________, have received, reviewed and agree to abide by the Department of Athletics’ Injury Policy. I understand that if I do not follow this policy, appropriate measures will be taken by the Department of Athletics and/or by my coach.

________________________________   _________________
Signature of Student-Athlete     Date

________________________________   _________________
Signature of Parent/Guardian     Date