



**GATEWAY UNIFIED SCHOOL DISTRICT  
SHASTA LAKE SCHOOL**

4620 Vallecito St. ~ Shasta Lake, CA 96019  
Melanie Sanderson, Principal  
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Home of the Rams

*"A California Distinguished School"*

Parents and Athletes,

Game days are important to athletes; however, student athletes must understand their options for leaving the campus. This is to ensure the safety of the student athlete and pass along the knowledge of where athletes are after school in case of an emergency. Please keep in that on Monday, school is released at 1:15 p.m.

**Home Game Policy:**

Student athletes have **two** options once school is dismissed.

- Option 1: Leave campus immediately and go home. Athletes may not return to campus until the specified time of their coach. This guarantees that there will be an adult to supervise student activities.
- Option 2: Remain at school and report to one of two places:
  - S.A.I.L.S. (You must be enrolled in the program to exercise this option)
  - A teacher's room, where there is a supervising teacher (the student athlete's parents and student athlete must make prior arrangements with the teacher and notify the athletic director and office before undertaking this option)

**Away Game Policy:**

Student athletes have **three** options when going to an athletic event.

- Option 1: At the conclusion of the school day, the student athlete may leave Shasta Lake School with their parent/guardian.
- Option 2: The student athlete may leave Shasta Lake School early with their parent/guardian through the office, but must attend five periods of the day.
- Option 3: If a student athlete is leaving directly from campus with anyone other than their parent, the parent of the student athlete must provide the office with a signed note, which must state their approval for their student athlete to leave with a specified parent on a specific date.

Please remember that if there is a doctor's appointment, they must have a note from the doctor to excuse them from missed classes, or they may not participate in the athletic event.

I have read and understand the above policy. Please return this form to the Athletic Director.

Student Athlete Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_