

PRE-SEASON REPORT
SHERBURNE-EARLVILLE CENTRAL SCHOOL DISTRICT

TEAM: _____

DATE: _____

HEAD COACH: _____

PHONE: _____

EMAIL: _____

List of items needed prior to season:

PRE-SEASON CHECK LIST

- 1. Student-Athlete packet is complete and turned into HEALTH office.**
 - Team information Sheet is in Alphabetical order.
- 2. Medical Kit is properly stocked and issued. (Emergency Numbers).**
 - Reference First Aid Equipment sheet for proper supplies.
 - Notify Athletic Director of missing items.
- 3. Team room is organized. All locks and lockers are have been assigned and documented.**
- 4. Keys have been issued.**
- 5. All athletes' equipment has been issued and documented.**
- 6. Pre season meeting with Athletic Director has been scheduled.**
- 7. Storerooms have been organized.**
- 8. Rosters are documented in alphabetical order and submitted to Athletic Department.**
- 9. All uniforms have been inventoried and distributed.**
- 10. Athlete is academically eligible to participate.**
- 11. Familiar with rules and regulations**
- 12. Attend preseason league meeting**
- 13. Practice Plans (Follow Curriculum Map)**
- 14. Game Schedules / Gym Schedules**
- 15. Water jugs and ice chest**
- 16. Sign-up sheets**
- 17. Refer to Handbook p. 74 (H.S.) & p. 98 (M.S.) # of Practices Prior to Contest**
- 18. Know where the closest AED is located**

Date turned in _____ Coaches Initial _____ AD's Initial _____