



LUMBERTON MIDDLE SCHOOL

30 Dimsdale Drive
Lumberton, New Jersey 08048
Phone: 609-265-0123

Richard Brown
Principal

Kate Cooney
Assistant Principal/Athletic Director

IMPORTANT INFORMATION REGARDING SPORTS PHYSICALS

Dear Parent/Guardian:

As required by N.J.A.C. 6A:16-2.2(h) and the Lumberton Township School District, students participating on a school sponsored interscholastic athletic team or squad must receive a medical examination. Tryouts for fall sports will begin the first full week of school. A student cannot try out unless the required paperwork is on file. If you have any questions about your child's physical expiration date, please do not hesitate to contact Mrs. Gambino, the school nurse, at (609) 265-0123 ext. 3216. **Please be aware that Mrs. Gambino has the same schedule as the other LMS teachers and does not work over the summer. Please feel free to drop off any completed physicals and paperwork in the main office during summer hours. There will be an envelope with a sign in sheet for you to sign when the paperwork is dropped off.**

REQUIRED PAPERWORK

1. Participation Physical Evaluation Medical Eligibility Form
2. Health History Update
3. Sports-Related Concussion Policy Acknowledgement Form
4. **Medical Clearance - Post Covid Form - **Written medical clearance is no longer required for post covid. It is recommended that athletes see a licensed provider after a COVID illness due to potential medical complications.****
5. Sudden Cardiac Death Pamphlet Sign-Off Sheet
6. Opioid Sign-Off Sheet
7. Asthma Treatment Plan with Self- Medication Contract*
8. Allergy Management Protocol*

Numbers 1-5 of Required Paperwork listed above can be obtained on the *LMS website* under *Documents* in the *Athletics* folder. Sports Physicals are considered current as long as they were completed less than 365 days from the date that tryouts begin for that sport. **If a student's physical is more than 90 days ago but less than 365 days before the start of the current sports season a Health History Update form must also be completed.** Information on *Student Athlete Injuries and Sign Off Forms* are in the *Athletics* folder with the sign off sheets listed above found within that information. Numbers 6&7 of the Required Paperwork can be found on the *Lumberton District website* under the *Parents* heading *Forms for Parents* if not already turned into the nurse. Please use ONLY the forms on the website as they are current, and we are unable, by law, to accept any other version.

It is the parent's/guardian's responsibility to ensure that all forms are completed thoroughly.

Incomplete forms will be returned

All sports physicals must be reviewed and approved by the school doctor before students can tryout for a sport. There will be no exceptions. The school nurse **DOES NOT** have the ability to approve a physical. **Paperwork is due by 8:00 AM on the final due date by sport as follows:**

Soccer, Field Hockey & Flag Football August 22, 2025 (FINAL DATE)

Basketball and Cheerleading October 31, 2025 (FINAL DATE)

Baseball, Softball, and Track February 20, 2026 (FINAL DATE)

Student Athletes must bring their paperwork directly to the Nurse.

All paperwork can be obtained from the LMS Website under Documents in the Athletics folder.

___ **NJ DOE Physical Form (Participation Physical Evaluation Medical Eligibility Form)**

- Physical Exams are valid for 365 days (one year).

___ **Health History Update**

- This form must be submitted if your Physical was more than 90 days but less than 365 days before the start of the current sports season.

___ **Medical Clearance - Post Covid Form**

- **Written medical clearance is no longer required for post covid. It is recommended that athletes see a licensed provider after a COVID illness due to potential medical complications.**

Required once per year:

___ **Sports-Related Concussion Policy Acknowledgement Form**

___ **Sudden Cardiac Death Pamphlet Sign-Off Sheet**

___ **Opioid Sign-Off Sheet**

Additional forms that may be required:

___ **Asthma Action Plan**

- REQUIRED for all students with Asthma or prescribed an inhaler. This form MUST be on file in the Nurse's office. An updated form must be submitted every school year.

___ **Emergency Health Care Plan for the Administration of an Epinephrine Auto-Injector**

- REQUIRED for all students prescribed an Epi-Pen. This form MUST be on file in the Nurse's office. An updated form must be submitted every school year.

Student NAME _____

Grade: (circle) 6 7 8

SPORT(S) _____

Parent Signature _____ Date _____