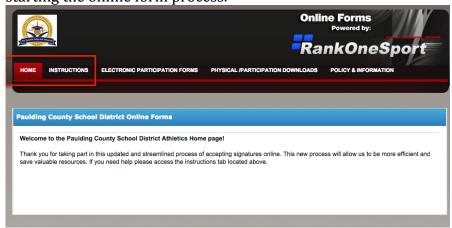
Rank One Sport Electronic Forms Parent Guide

Paulding County School District Public Electronic Forms Site:

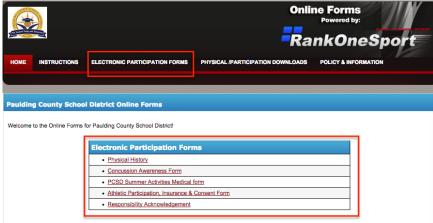
https://pauldingdistrict.rankonesport.com/Main/Default2.aspx?Type=4

Home & Instructions: Please read the HOME and INSTRUCTIONS tab before starting the online form process.



Electronic Participation: Click on the ELECTRONIC PARTICIPATION tab. The following PCSD participation forms will be submitted electronically:

- Physical History
- Concussion Awareness
- Summer Activities Medical
- Athletic Participation, Insurance & Consent
- Responsibility Acknowledgement (Sportsmanship Letter, Athlete Responsibility, Code of Conduct, Athletic Handbook, Heat Guidelines)



GET STARTED: Select the first form. You *MUST* know your child's 5-6 digit STUDENT ID number to get started. In the required fields enter your child's Legal FIRST NAME, LAST NAME, STUDENT ID and SELECT SCHOOL.

Note: The student's name and ID must match the information in the school's Rank One Sport program. If you receive a message stating, "This student information does not match any existing student" contact your school's athletic administrator.

Student First Name	Student Last Name:	Student ID:	School Attending in 2015 - 2016:
Aarontest	Aarontest	012345	Hiram High School
Required	Required	Required	Required

COMPLETE FORM(S): Complete all of the required fields for each form, sign electronically, and validate signature(s) by checking the "I agree" box. You are required to provide an email address to receive an email notification of completion and to receive an electronic copy of the completed form.

Note: If you do not have an email address, enter *NA*. You will have the option to print the form from the submission success page for your records.

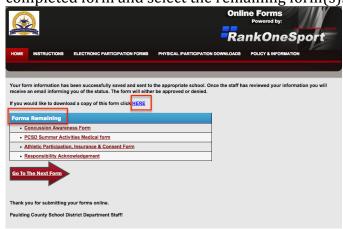


SUBMIT FORM: Click submit, if any of the required fields are missing it will state next to the field *Required. Complete required fields and re-submit.

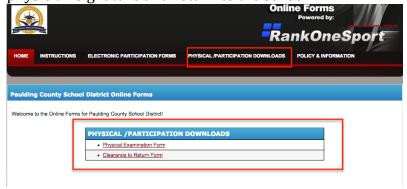
(Revised: 7/15)

By signing this concussion form, I give	Hiram High School				
High School permission to transfer this concussion form to the other sports that my child may play. I am aware of the dangers					
of concussion and this signed concussion form will represent myself and my child during the 2015-2016 school year. This					
form will be stored with the athletic physical form and other accompanying forms required by the					
School System.					
*Required					

SUBMISSION SUCCESSFUL: A page will display with the option to print the completed form and select the remaining form(s).



PHYSICAL/PARTICIPATION: Per the instructions, print the Physical Examination Form and Clearance to Return Form(if applicable), complete the form with physician signature and return to the school.



POLICY & INFORMATION: PCSD policies and information for your review and/or download.

