

Rochester Mountain Bike Team Information

2012 Fall Calendar Overview August 20-October 29

August 15, Wednesday 6:50 PM Sign-Up – Eastwood park shelter
August 20, Monday 4:30 – 6:00 PM, regular practice starts
Regular Practice Schedule Mon, Thurs – 4:30 -6 PM
Sept 8-9, Inver Grove Heights, Salem Hills pre-ride and race
Sept 22-23, Rochester, Eastwood pre-ride and race
Oct 6-7, River Falls, WI, White Tail Ridge pre-ride and race
Oct 27-28, Burnsville, Buck Hill pre-ride and race
Oct 29, Last Practice
Nov 1, Awards Banquet

Rochester Mountain Bike Team (RMBT) Program

This program is run under the auspices of the Rochester Active Sports Club (RASC) as a Minnesota High School Cycling League team. The goal is the development of Mountain Biking both as an individual and team sport in Rochester high schools. This bike program is open to all students in 9th – 12th grades in the Rochester area. RMBT members will be considered full members of RASC. RASC provides members with regular e-mail updates, a club web site, an electronic bulletin board, and insurance. Members are also entitled to discounts off items purchased at several local bike stores.

Program Costs

The cost / student will be **\$399**. This fee includes NICA registration and race fees as well as general team expenses. **Fees will need to be paid when registering. All Checks should be made payable to RASC.** Please inquire about need based financial assistance.

Training Sessions – Dates and Times

The first training session of the 2012 season will be Monday, August 20. Regular training sessions will be held on Monday and Thursday from August 20, 2012 through October 29 2012. All training sessions will run from 4:30 pm until 6:00 pm.

Riders should plan to arrive promptly and ready to start the training session at 4:30. A minimum of 2 coaches will be present at all sessions. Bikers are required to make their own travel arrangements to and from all training sessions. Bikers should arrange for pick-up by 6:00 pm.

Cancellation of Training Sessions

In the event of severe weather, practice will be canceled. We may ride in rain/wet weather; practice time may be shortened to 1 hour. If in doubt, check the RMBT Facebook page (www.facebook.com/RochesterMountainBikeTeam). A notice will be placed no later than 3:00 pm on practice days.

Training Locations

We have great trails at Eastwood Park; we will generally practice there. For variety and fitness, we will ride on local gravel roads occasionally. The location for these sessions will be posted on the Facebook page and e-mailed.

Competitive and Recreational Biking

Why cycling? Cycling is a family-friendly fitness activity that can be done lifelong, with great social qualities. Groups of cyclists (except when climbing difficult hills) can talk, joke, and some even sing as they ride.

Training and racing with a team provides life lessons in self-discipline, teamwork and sportsmanship, along with the fitness and camaraderie. It is our objective to help each member find ways to reach their goals and develop life skills.

Good “bike-fit” is important, be sure to consult with an expert before purchasing a new or used bike!

Is Participating Dangerous? Are you new to mountain biking? Forget what you have seen on TV with the X-Games or soft drink commercials. In cross-country bike races, the average speed is usually around ten to twelve miles per hour. This is an endurance sport where the fittest athletes win. Each year, the National Interscholastic Cycling Association (NICA) collects data on injuries from every high school mountain biking team. Typically, for the whole League combined, there will be one or two broken bones, some sprains, a few cuts, some bruises, lots of nicks and scrapes, but little else. Statistically, we suffer fewer serious injuries than most other mainstream sports, especially contact sports.

We do our best to minimize the risks to your athlete. Certain risky behaviors are discouraged or forbidden, the League helmet rule is strictly enforced and we teach each athlete bike-control skills early in the season to minimize the risk of crashing. After all, if you crash you not only risk injury but also lose valuable time during races. Even with our best efforts, crashes and injuries can occur. RASC requires all athletes to comply with certain athletic eligibility rules, including that the athlete have personal medical insurance.

Depending upon numbers, we will group riders into three categories – beginners with no prior experience mountain biking, riders who have the basic skills and wish to become more proficient, and riders who are training to be competitive.

Team Member Conduct

Each member of the team is expected to conduct him/herself in a manner, which is conducive to learning, safety, and having respect for teammates and coaches.

Examples of misconduct: (not inclusive) – not attentive, distraction to other riders, disruptive behavior, lack of effort, misrepresenting practice attendance, and not following coaches instructions. Helmets are required at all times!

Contact Information

If you have questions please contact Brian or Melissa Gregg:

E-mail: RochMTB@gmail.com

Phone: 507-358-3286, 507-398-5934

REQUIRED EQUIPMENT:

- Helmet
- Mountain bike – more details below
- Water bottle/cage or equivalent

RECOMMENDED EQUIPMENT:

- Clipless pedals are recommended for both safety and efficiency
- Gloves and eye protection (recommend generic sport glasses under \$10)
- Cycling shorts (lycra or baggy)
- Wind breaker, leg warmers, and arm warmers

MOUNTAIN BIKES ONLY

League athletes must compete using mountain bikes that have 26 (or 29) inch wheels (or between 26 and 29 inches) and the tires must not be narrower than 1.75 inches. In addition:

- Tires must have knobbies – no slick tires are permitted
- No road bikes (or mountain bikes with down-drop handle bars)
- No cyclocross bikes (or other 700c bikes)

NO SINGLE-SPEED BIKES

Pushing big gears has been proven to be detrimental to the joints (specifically the knees) of young riders. Bikes must have multiple gears including at least two chain-rings up front and at least five cogs in the rear.

FRONT AND REAR BRAKES

Bicycles must have fully operational front and rear brakes. Brakes must be adjusted to provide significant stopping power. Brake pads must not be worn below recommended limits.

Clothing: What to wear

- Clothing appropriate for the weather conditions.
- Footwear appropriate for cycling (no flip-flops).
- Cycling gloves and glasses.
- A helmet must be worn at all times while riding.
- Shirts are required

Please return the following forms to:

Rochester Mountain Bike Team
619 3rd St. SW
Rochester, MN 55902

Please include student fee of \$399 with registration. Checks must be made to **Rochester Active Sports Club.**

ROCHESTER AREA COMPOSITE MOUNTAIN BIKE TEAM

Eligibility and Behavior Standards Information for Participating in RMBT Activities

Academic Eligibility

Student athletes must maintain satisfactory progress towards graduation. All student athletes should have achieved the following number of credits at the end of each semester to maintain eligibility.

Freshman Year:

End of 1 st Semester	3 credits
End of 2 nd Semester	6 credit

Sophomore Year:

End of 1 st Semester	9 credits
End of 2 nd Semester	12 credits

Junior Year:

End of 1 st Semester	15 credits
End of 2 nd Semester	18credits

Senior Year:

End of 1 st Semester	21 credits
End of 2 nd Semester	24 credits

First quarter freshman and middle school students must maintain passing grades in all classes. All cases falling below this level will be reviewed by the administration. If a student is failing, the administration will intervene and develop a plan of action to assist the student. Students who are more than one (1) credit deficient are academically ineligible. Students who are deficient one (1) or less may be placed on a contract. The contract may include any of the following options:

- a. Full participation with conditions
- b. Practice without competition
- c. Total non-participation

Student athletes considered to be Division I or II scholarship prospects are reminded that there are course requirements to be eligible for scholarships. Contact your Guidance Counselor.

Attendance and Behavior Standards

Athletes are expected to abide by all school attendance and behavior guidelines. Participation in extracurricular activities is a privilege offered to students in good standing. Athletes are expected to be in class as scheduled. Unexcused absences may result in exclusion from the next event. Athletes may be excluded from events or activities due to behavior unbecoming that of an athlete or for a violation of the school's rules of conduct. A felony conviction will have a penalty no less than that for a second chemical violation. This determination will be made by the Coach, Athletic Director and Building Principal or Assistant Principal.

Mood-Altering Chemicals

A. Philosophy and Purpose

The Rochester Area Composite Mountain Bike Team recognizes the use of mood-altering chemicals as a significant health problem for many adolescents, resulting in negative effects on behavior, learning and the total development of related skills. Others are affected by the misuse and abuse of family, team members or other significant persons in their lives.

B. Rule

During the calendar year, regardless of the quantity, a student shall not: 1) use or have in possession a beverage containing alcohol; 2) use or have in possession tobacco; or, 3) use or consume, have in possession, buy, sell, or give away any other controlled substance. The rule applies during the entire year including the summer months. It is not a violation for a student to be in possession of a controlled substance specifically prescribed for the student's own use by her or his doctor.

C. Penalties for Activities

a. First Violation

Penalty: After confirmation of the first chemical violation, the student shall lose eligibility for 50% of the scheduled regular season events of the activity season in which the student is a participant. Any percent of an unfulfilled suspension will be applied in the next season the student participates in. The first possession violation will result in a suspension of 2 weeks or 2 events, whichever is greater.

b. Second Violation

Penalty: After confirmation of the second chemical violation, the student shall lose eligibility for one calendar year.

c. Third Violation

Penalty: After confirmation of the third and subsequent violations, the student shall lose eligibility for further participation.

Racial, Religious, Sexual Harassment/Violence and Hazing

- A.** During the school year, a student shall not participate in hazing or violate the racial/religious/sexual harassment and/or racial/religious/sexual violence expected code of conduct. Respect is provided to everyone.
- B.** Types
1. Racial Harassment
 2. Racial Violence
 3. Religious Violence
 4. Assault
 5. Sexual Harassment
 6. Sexual Violence
 7. Hazing
- C. Penalties – Racial/Religious/Sexual Harassment and Hazing Violations:**
- a. First Violation:**
After determination of the violation, a student shall lose eligibility for the next two (2) consecutive interscholastic contests or two (2) weeks of a season in which the student is a participant, whichever is greater.
- b. Second Violation:**
After determination of the second violation, the student shall lose eligibility for the next six (6) consecutive interscholastic contests in which the student is a participant or three (3) weeks, whichever is greater.
- c. Third Violation:**
After determination of the third or subsequent violations, the student shall lose eligibility for the next twelve (12) consecutive interscholastic contests in which the student is a participant or four (4) weeks, whichever is greater.

As a student I understand and accept the following responsibilities:

- I will respect the rights and beliefs of others and will treat others with courtesy and consideration.
- I will be fully responsible for my actions and the consequences of my actions
- I will respect the property of others.
- I will be responsible for all equipment issued to me and will return it at the conclusion of the season.
- I will respect and obey the rules of my school and the laws of my community, state and country.
- I will show respect to those who are responsible for enforcing the rules of my school and the laws of my community, state and country.

The student and parent/guardian authorize the release of documents and other pertinent information by the school and RMBT in order to determine student eligibility.

The student and parent/guardian authorizes RMBT to use my name, photos, video or other record of my participation connected to the RMBT to promote the programs with media and Internet.

ROCHESTER AREA COMPOSITE MOUNTAIN BIKE TEAM

Eligibility and Behavior Standards Information for Participating in RMBT Activities

I have read, understand and acknowledge receiving the Eligibility Information and Behavior Standards of the RMBT.

As a student participating in RMBT activities I understand and accept the following responsibilities:

- I will respect the rights and beliefs of others and will treat others with courtesy and consideration.
- I will be fully responsible for my actions and the consequences of my actions.
- I will respect the property of others.
- I will be responsible for all equipment issued to me and will return it.
- I will respect and obey the rules of RMBT, my school and the laws of my community, state and country.
- I will show respect to those who are responsible for enforcing the rules of RMBT, my school and the laws of my community, state and country.

The student and parent/guardian authorize the release of documents and other pertinent information by the school and RMBT in order to determine student eligibility.

The student and parent/guardian authorizes RMBT to use my name, photos, video or other record of my participation connected to the RMBT to promote the programs with media and Internet.

Print Students Name: _____ Date: _____

Signature of Student: _____

Print Parent/Guardian Name: _____ Date: _____

Signature of Parent/Guardian: _____

Coach's Questionnaire

Athlete's Name _____ Male/Female

Age _____ Height _____ Weight _____ Grade _____ School _____

Please **print legible** the email address(s) that you want to receive practice notification, etc

Student: _____ Parent: _____

Please tell us a little about your athletic background and your goals for joining RMBT.

1. List your favorite sports and years of participation.

2. Have you ever raced a bicycle in an organized event? If so, please provide information on specifics of your experience (and specify what type of bicycle racing, e.g., road, mountain bike, track cyclocross).

3. On a scale from 0-10 where 0 is "never done it" and 10 is "nearly pro"
How would you rate yourself as a mountain bike racer?

Where do you want to be on that scale at the end of our season?

Describe what that looks like.

4. This year, what is your longest (hours:minutes) bicycle ride?

5. Do you now own or have access to a mountain bike? If not, do you have plans to acquire one*?

*If you cannot acquire the use of a mountain bike and you cannot afford to buy one, you may be eligible for a lending program based upon individual circumstances. Contact the organizers or one of the RMBT coaches to learn more.

ROCHESTER AREA COMPOSITE MOUNTAIN BIKE TEAM

Medical Attention Permission – Insurance Verification

Student name _____

RMBT requires a record of a satisfactory physical examination performed by a physician within the previous three years. The following questions must be answered by the parent or guardian:

1. Does the student have a physical record on file with RMBT? Yes No (Must have one on file before the first practice)
 2. Has the student been hospitalized since the above physical examination? Yes No
 3. Has the student had a major injury since the above physical examination? Yes No
 4. Has the student been found to have only one organ of usually paired organs?(i.e.: only one kidney, one good eye) Yes No
 5. Has the student required medication on a daily or episodic routine? (example: insulin daily or asthma medication with an attack) Yes No
 6. Has the student been knocked unconscious, had a concussion or head injury at any time within the past 12 months? Yes No
 7. Has the student fainted, blacked out, experienced dizziness or chest pain while exercising in the past year? Yes No
 8. Is there any weight loss or nutritional issues to consider, inducing self-induced vomiting, over-exercising, laxative use, or diuretic use to control weight? Yes No
 9. Do you know of or believe there is any health reason why this student should not participate in this sport of Mountain Bike racing? _____
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The undersigned, herewith,

- Grants the above named student permission to participate in RMBT Team activities.
- Grants permission to take the student on supervised trips connected with the RMBT Team activities.
- Understands that the student must refrain from practice or play during medical treatment until he/she is given a written permit by the attending physician to resume participation.
- Certifies that the answers to the questions above are correct and true.
- Certifies that the above named student is physically fit to participate in all Rochester Area Composite Mountain Bike Team activities.
- Because of the nature of mountain biking, I understand that RMBT, mountain bike sites, owners, chaperones, and coaches cannot be held liable for any accidents my child may sustain. However, I authorize the staff to secure any emergency treatment my child may need.

I am aware of and understand the risks of participation in the RMBT program.

As a parent/guardian I give permission for my son/daughter to be sent to our family doctor, or another doctor of his/her choice, for an examination or treatment deemed necessary by a coach, resulting from his/her activities in high school athletics.

I have my own insurance and/or will be responsible for all services rendered by a doctor or hospital.

Parents or students who may not wish to accept the risk or commitment of high school sports should not sign this form.

Students may not participate in RMBT activities without the student's and parent/guardian's signature.

Signed _____ Date: _____
(Signature of parent/guardian)

Signed _____ Date: _____
(Signature of student)

ROCHESTER AREA COMPOSITE MOUNTAIN BIKE TEAM
Emergency Information Consent Form

Racer's name: _____
Last First MI

Address: _____
Street City State Zip

Parent/Guardian Agreement

I, the parent/guardian of the racer, a minor, agree that I and the racer will abide by the rules of the Rochester Area Composite Mountain Bike Team, its associates and sponsors. Recognizing the possibility of physical injury associated with mountain biking and in consideration for the Rochester Area Composite Mountain Bike Team accepting the racer for its mountain bike program and activities, I hereby release, discharge and/or otherwise indemnify the Rochester Area Composite Mountain Bike Team, its affiliated organizations and sponsors, their employees, volunteers and associated personnel, and facilities utilized for the programs against any claim by or on behalf of the racer as a result of the racer's participation in the programs and/or being transported to or from the same, which transportation I hereby authorize.

Parent/Legal Guardian (please print): _____

Parent/Legal Guardian (signature): _____ Date: _____

Emergency Information

Who should be notified Home phone Cell phone Address

Alternate who can be notified Home phone Cell phone Address

Physician/HMO/Clinic name Phone Address

Medical Insurance Company Phone

Policy holder Medical policy number

Dentist name Phone number

Dental insurer Dental policy number

List any allergies, medical problems, limitations or prohibitions the racer may have (use back if needed)

Consent for Medical Treatment

As the parent or legal guardian of a participant of the Rochester Area Composite Mountain Bike Team, I hereby give my consent for emergency medical care prescribed by a duly licensed Doctor of Medicine. This care may be given under whatever conditions are necessary to preserve the life, limb or well-being of my dependent.

Signature of parent/legal guardian: _____

Date: _____