

# FAIRFIELD CHRISTIAN ACADEMY SUMMER PHYSICAL EDUCATION

For FCA Students entering grades 9–12

**HIGH SCHOOL SUMMER PHYSICAL EDUCATION OVERVIEW**– High School Physical Education is an on-line program through the Ignitia program offering student access at any time of the day. This program combines the Ignitia Physical Education .25 credit course with the Ignitia Physical Fitness .25 credit course during the summer. Successful completion of the course with a minimum grade of 65% will result in .50 credit for Physical Education. This grade will be entered on the student's transcript as a summer term course. Students who may already have high school credit can also take mini-courses tailored to the amount required for the student to earn the .50 physical education requirement.

**Course Descriptions:** **Physical Education** focuses on performance of individual and team sports, with explanations of proper technique, rules of the game, and preparation. Team sports introduced include soccer, basketball, football, baseball, and volleyball. An introduction to fitness, strength, endurance, and nutrition is also included. Students will have the opportunity to perform each sport on their own time, while keeping a log of activity. The goal is incorporation of activity into their daily lives and the gain of lifelong healthy fitness habits. **Physical Fitness** focuses on the health benefits of regular physical activity and of a long term exercise program. As students work through the course, they will learn about the many aspects of physical fitness, including basic nutrition, the importance of flexibility, cardiovascular health, muscle and strength training, and realistic goal setting. Along the way, students will be required to maintain and submit an activity log in order to measure progress in course exercises, as well as in personal fitness goals.

**Grading:** Lessons and quizzes, within each unit, require a 95% grade before the student can move on to the next assignment. All units have a final test that must be completed at FCA or via Zoom. Those monitored tests will be done on Wednesdays from 9:30-10:30 during June and July either at FCA or via Zoom. Course weights: Lessons – 30%; Quizzes – 25%; Projects – 10%; Unit Test – 35%

Mrs. Kara Stephens will be the supervising instructor during the summer.

Student Orientation will be held during the last week of the school year.

The program must be completed by the first week of August. If a student is not done by that deadline then the student will be scheduled into an Ignitia lab until the course is complete --- please note that will mean a 2 week period where the student will not be able to communicate with the teacher so finishing on time is highly recommended.

Cost \$160.00\* – REGISTRATION DEADLINE is May 15th. Student must be going into high school. Payment must be received at FCA by May 25<sup>th</sup> or student will not receive log-in at orientation.

\*This is based on taking both courses for the .50 credit amount. Students who require less credit, the fee will be prorated based on the amount of credit they need to earn with each .10 credit \$32.00.

Mail form to the attention of: Fairfield Christian Academy Summer Program, 1965 N. Columbus Street, Lancaster, Ohio 43130 or you may bring the form directly to the High School Office or e-mail to [kstephens@fcaknights.us](mailto:kstephens@fcaknights.us) or fax to or fax to 740-654-7689.

**Course Cancellation:** In the event of course cancellation, you will be notified and a full refund of fees will be issued.

**Refund Policy:** A \$20.00 fee will be charged for all cancellations. (Does not apply in the case of a course cancellation.) No refunds will be issued unless withdrawal is made 2 weeks prior to start of course.

# SUMMER PHYSICAL EDUCATION PROGRAM REGISTRATION

To register, please return this form by May 15<sup>th</sup>. Payment must be made by May 25<sup>th</sup>.

Student Name: \_\_\_\_\_

Please select amount of Physical Education credit needed:

_____ - .50 credit (\$160.00)	_____ - .30 credit (\$ 96.00)	_____ - .10 credit (\$ 32.00)
_____ - .45 credit (\$144.00)	_____ - .25 credit (\$ 80.00)	_____ - .05 credit (\$16.00)
_____ - .40 credit (\$128.00)	_____ - .20 credit (\$ 64.00)	
_____ - .35 credit (\$112.00)	_____ - .15 credit (\$ 48.00)	

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Parent or Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone (daytime) \_\_\_\_\_

Student Name \_\_\_\_\_ Student Grade (next academic year) \_\_\_\_\_

Complete the *Emergency Medical Information* below – although the majority of this class is on-line at home, the student will still need to come into FCA to take the testing and this information must be on file in the case of an emergency during those brief times on campus.

## **Emergency Medical Information**

Emergency Contact:

Name \_\_\_\_\_

Telephone number \_\_\_\_\_

Please indicate relevant medical information about this child:

Child's Physician \_\_\_\_\_ Phone \_\_\_\_\_

Child's Dentist \_\_\_\_\_ Phone \_\_\_\_\_

Hospital \_\_\_\_\_

Personal health/accident insurance carrier \_\_\_\_\_

**Parent Authorization:** In the event reasonable attempts to contact me are unsuccessful, I give consent for: 1) the administration of any treatment deemed necessary by the above named doctors, or by another licensed doctor/dentist if one above is not available. 2) the transfer of my child to any reasonably accessible hospital. Authorization does not cover major surgery unless two other licensed doctors, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

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

**Refusal to consent:** In the event of injury or illness, I do not give my consent for emergency medical treatment of my child.

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