

**Bloomington High School
Physical Education Participation Form**

All pupils registered in the schools in District 87 Public Schools are required to participate in regular or adaptive physical education class for instruction. The following is a definition of adaptive physical education:

Adaptive physical education is a specifically designed program of developmental activities, games, sports, and rhythms suited to the interest, capacities, and limitations of pupils with restricting conditions who may not safely or successfully engage in unrestricted participation in activities of the regular physical education program.

Name _____ Date _____

School _____ Grade _____

Estimated Duration: _____ Week _____ Month _____ Year

Description of Problem:

_____ 1. Full Program Participation

_____ 2. Limited Participation – Indicate Below

_____ A. Contact

| | Yes | No |
|--------------------|-------|-------|
| Basketball | _____ | _____ |
| Contact Intramural | _____ | _____ |
| Field Hockey | _____ | _____ |
| Floor Hockey | _____ | _____ |
| Football | _____ | _____ |
| Eclipse ball | _____ | _____ |
| Soccer | _____ | _____ |
| Softball | _____ | _____ |
| Volleyball | _____ | _____ |
| Paddleball | _____ | _____ |
| Recreational Games | _____ | _____ |

_____ C. Non-Contact – Vigorous

| | Yes | No |
|---|-------|-------|
| Aerobics | _____ | _____ |
| Badminton | _____ | _____ |
| Pilates | _____ | _____ |
| Jogging | _____ | _____ |
| Locomotor Skills (Running, Jumping, etc) | _____ | _____ |
| Physical Fitness Tests | _____ | _____ |
| Running Games | _____ | _____ |
| Swimming | _____ | _____ |
| Track | _____ | _____ |

_____ B. Non-Contact-Moderate

| | | |
|----------------------|-------|-------|
| Walking | _____ | _____ |
| Rhythm and Dance | _____ | _____ |
| Stretching Exercises | _____ | _____ |
| Table Tennis | _____ | _____ |
| Tennis | _____ | _____ |
| Weight Lifting | _____ | _____ |
| Recreational Games | _____ | _____ |

_____ D. Classroom Activities
Resource Work, Table Games

_____ E. Special Protective Devices

_____ F. Rehab. Program (Exercise bike)

*****PE teacher reserves the right to restrict activity to include reports in the library in order to
Provide safe supervision of all students.**

Physician's Signature _____

_____ Date