



## YOUTH PROGRAMS BASEBALL / SOFTBALL PROGRAM 2019

COSTS: Member - \$75.00 Non-member - \$85.00  
\$10.00 late fee after 1 February  
\$10.00 Discount for siblings

Welcome to the Youth Baseball/Softball Program. We are glad you have registered to play with us and hope you have a good time learning the game and making new friends. This program stresses the importance of participation, socialization, and education rather than winning or losing. Hopefully, this program will have a positive impact on each player.

1. **SEASON:** The season will run from April thru June. Games will be played Monday-Friday. Exact days will be determined after all have registered and the league alignment is known. Most teams in each league will play approximately 2 games a week. The days your games will be scheduled may vary week by week. This will also be true of practice days and times. Each coach will contact you to provide practice and game schedules. The number of teams we have in each league this year will determine the exact finish of the season. Schedules of games will be distributed to the coaches before the first game starts.

2. **ELIGIBLE AGE:** Players must be between 5 and 15 yrs of age. The "playing age" is the age a child is as of 31 JULY 2019. Example; if a child is 7 and turns 8 on 16 June of 2019, their playing age is 8.

3. **PLAYER EVALUATIONS** will be held the week of 5 – 7 March for ALL PLAYERS in the Edwards Program, age levels 9-15 yrs, both softball and baseball. All participants who played last year at Edwards in the Minor League and above **MUST** once again be evaluated. Players **under 9** are not evaluated. Why? Evaluations help to keep the teams balanced.

a) BASEBALL (AT MAJOR LEAGUE FIELD ACROSS FROM BOWLING CENTER)  
9-10 year olds: Tuesday 5 March @ 1700

b) BASEBALL (AT MAJOR LEAGUE FIELD ACROSS FROM BOWLING CENTER)  
11-12 year olds: Wednesday 6 March @ 1700

c) JUNIOR BASEBALL (13-15year olds) Roberts Field  
Date and Time to be announced. In the event that we only have one team, then evaluations will not be conducted for this age group.

d) SOFTBALL (AT FIELD #2)  
9-15 year olds: Thursday 7 March @ 1700

4. **PICTURE DAY:** TBA

5. **PRACTICES** will be determined by the coach for each team. Practices are a vital part of the program and the development of the child in the sports. ALL PLAYERS are expected to be in attendance at each practice. It will be the discretion of the coach to excuse a player from practice. It is the parent's responsibility to contact the coach if the child will not be at practice or a game. To avoid any problems on this matter, talk to your coach early regarding his/her policies on absences. **PLEASE CALL YOUR COACH IF YOUR CHILD IS GOING TO MISS A PRACTICE OR A GAME**

6. **Sports Physical and Shot Records** are required in order to register for the upcoming Baseball/Softball season.

7. **UNIFORMS** will be furnished by the Youth Sports Department.

Uniforms for ALL Leagues will consist of a hat, and uniform jersey top, all of which the player will get to keep after the season is completed. Please note that pants will NOT be furnished, and are not required. Any uniform that is lost or damaged will be the financial responsibility of the parent to replace.

8. **VOLUNTEERS** are always needed for the Youth Sports Program and Baseball and Softball are no exceptions. We need UMPIRES, COACHES, TEAM MOMS/DADS, and SCOREKEEPERS. Please complete the volunteer forms at the Youth Center.

9. **REFUND POLICY** for Little League is as follows:

- a) A full refund will be given if the player leaves the program before they are placed on a team.
- b) A 50% refund will be given if a player leaves a team before the first game is played but after the player has been placed on a team.
- c) No refund will be given once the season begins.
- d) Players must return uniforms to the Youth Sport Department before any refund is processed.

10. **PARENT'S MEETING** will be held on 19 March @ 1300 and 1700 and 26 March @ 1700 both meetings will be at the Main Youth Center. We'll discuss last season and the upcoming season.

11. All of us who participate in some way with the Youth Sports Programs should always remember to set the example and put the emphasis on the children and not our own goals. Youth Baseball and Softball is for fun, this is not the Major Leagues. Coaches as well as umpires are volunteering their time to the program and to your child. We ask that you present a positive and supportive behavior in and around all Youth Sports. REMEMBER, IT IS JUST A GAME, FOR THE CHILDREN...

**Enjoy the season....**

**The Youth Sports and Fitness Department**

**Emil Graves  
277-8961**

## AIR FORCE YOUTH PROGRAMS REGISTRATION

### PRIVACY ACT STATEMENT

**AUTHORITY:** Title 10 U.S.C. 8012 and 44 U.S.C. 3101.

**PRINCIPLE PURPOSES:** To register dependent youth of military, retired and DoD personnel in the Air Force Youth Programs. Providing Youth Programs the authorization for medical treatment in emergency situations; authorization for transportation; record youth/family information; photo use authorization; and releasing of liability.

**ROUTINE USES:** This form may be disclosed to any DoD component or part thereof, and upon request to other Federal, State and local government agencies in the pursuit of their official duties; disclosed to news media; used for other lawful purposes including law enforcement and litigation.

**DISCLOSURE IS VOLUNTARY:** Failure to provide the information may preclude the individual from participation in Air Force sponsored youth programs.

<b>YOUTH NAME</b> <small>LAST, FIRST, MI</small>	<b>SPONSOR NAME / RANK</b> <small>LAST, FIRST</small>	<b>SPOUSE NAME / RANK</b> <small>LAST, FIRST</small>	<b>EMERGENCY CONTACT</b> <small>OTHER THAN PARENT</small>
<b>BIRTHDATE / AGE</b>	<b>ORGANIZATION</b>	<b>HOME ADDRESS</b>	<b>EMERGENCY PHONE</b> <small>SAME AS CONTACT</small>
<b>MALE / FEMALE</b>	<b>WORK PHONE</b>	<b>WORK PHONE</b>	<b>PHOTO PERMISSION</b> <small>YES / NO</small>
<b>YOUTH HOME EMAIL</b>	<b>CELL PHONE</b>	<b>CELL PHONE</b>	<b>SPONSOR WORK EMAIL</b>
<b>HOBBIES &amp; INTERESTS</b>	<b>SPONSOR SS #</b> <small>(LAST 4)</small>	<b>HOME PHONE</b>	<b>PARENT VOLUNTEER</b> <small>YES / NO</small>

**SPECIAL NEEDS CARE / ILLNESS / ALLERGIES / INJURIES**

### RELEASE OF LIABILITY AND AGREEMENTS

**MEDICAL CARE AUTHORIZATION:** I hereby authorize my child to receive emergency medical treatment whenever it is deemed necessary at any U.S. Military Facility or any other medical facility when a U.S. Military Medical Facility is not available.

**HOLD AND SAVE HARMLESS AGREEMENT:** Now therefore, in consideration of mutual covenants and agreements between the parties here to it is agreed as follows: We the parents of the above named youth agree to save and hold harmless as well as defend the Base Youth Programs, Services Division's Central Base Fund, Department of the Air Force and the contractor from and against any and all claims, demands, actions, debts, liabilities and attorney's fees. Parent further agrees to save and hold harmless the contractor and all other parties involved from and on account of damages of any kind which the youth may suffer as a result of the acts of participating in the program.

**TRANSPORTATION/FIELD TRIP:** I give Youth Programs permission to transport the aboved named youth to and from any events that I am notified of in advance.

<b>SIGNATURE OF PARENT/LEGAL GUARDIAN</b>	<b>DATE</b>
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### FOR USE BY YOUTH PROGRAM STAFF (COMPLETE & INITIAL)

<b>PROGRAM ORIENTATION DATE</b>	<b>MEMBERSHIP CARD ISSUE DATE</b>	<b>MEMBERSHIP CARD NUMBER</b>
<b>EXPIRATION DATE</b>	<b>MEMBERSHIP FEE PAID</b>	<b>STAFF INITIAL / DATE</b>

# YOUTH SPORTS REGISTRATION

Baseball  Softball  Basketball  Soccer  Start Smart  Other \_\_\_\_\_

## RECORD OF PREVIOUS PARTICIPATION

Number of Years Played

Level of Play

Position

## NOTICE of REQUIREMENTS

### PHYSICAL EXAMINATION/SCREENING

There are no known medical problems for the youth named above that would prevent safe participation. He/she is medically qualified to participate in the Youth Sports & Fitness Program. NOTE: A physical is required ever year and must be on file for the child to participate. \_\_\_\_\_ Parent Initials

### MANDATORY ATTENDANCE OF LEAGUE MEETING

I am aware of that the placement of my child on a team will require that a parent or guardian attend a League Parent Meeting. \_\_\_\_\_ Parent Initials

## RELEASE OF LIABILITY AND AGREEMENTS

I, the parent/legal guardian of \_\_\_\_\_ do hereby give permission for his/her attendance and participation in the Youth Sports & Fitness Program.

UNIFORMS AND EQUIPMENT RETURN: In consideration of the benefits to my child from the Youth Sports & Fitness Program, I agree to either return the uniform and equipment issued to my child in the same condition as when it was received, except for normal wear and tear, or I agree to pay the Youth Program the cost to replace such item(s).

TRANSPORTATION: I give Youth Programs permission to transport the above named youth to and from any events I am notified of in advance. I agree to pay transportation costs for my child to participate in any special or championship team which may involve competition at distant locations except when specifically supported by Youth Programs.

## Child and Sport's Photography Release and Consent

I \_\_\_\_\_ DO/DO NOT authorize consent to the photographing and/or videotaping of my child named below. I understand that these photographs and videos may be used in reference only for promotion, publicity, or recognition purposes of the Child and Youth Programs.

Child's Name \_\_\_\_\_

Signature of Parent/Legal Guardian

Date

# ***NYSCA Parents Code of Ethics***

*I hereby pledge to provide positive support, care and encouragement for my child participating in youth sports by following this Code of Ethics.*

I will encourage good sportsmanship by demonstrating positive support for all players, coaches and officials at every game, practice or other youth sports events.

I will place the emotional and physical well-being of my child ahead of any personal desire to win.

I will insist that my child play in a safe and healthy environment.

I will provide support for coaches and officials working with my child to provide a positive, enjoyable experience for all.

I will demand a drug and alcohol-free sports environment for my child and agree to assist by refraining from their use at all youth sports events.

I will remember that the game is for children and not for adults.

I will do my very best to make youth sports fun for my child.

I will ask my child to treat other players, coaches, fans, and officials with respect regardless of race, sex, creed, or ability.

I will promise to help my child enjoy the youth sports experience within my personal constraints by assisting with coaching, being a respectful fan, providing transportation or whatever I am capable of doing.

I will require that my child's coach be trained in the responsibilities of being a youth sports coach and that the coach agrees to the youth sports Coaches' Code of Ethics.

I will read the NYSCA National Standards for Youth Sports and do everything in my power to assist all youth sports organizations to implement and enforce them.

\_\_\_\_\_  
Parent's Name

(Please read, sign, and return)

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date