



Poway American Little League (PALL) 2012 Spring Season Player Contract and Application

For additional information or to register online go to www.PALLbaseball.org.



REGISTRATION INFORMATION:

1. Read and complete pages 1-4 2. Attach check payable to PALL 3. Mail to PALL at P.O. Box 894 Poway CA 92074

Poway American Little League is a charter member of the non-profit, *Little League Baseball Incorporated*.

Registration for the SPRING 2012 season begins on Nov. 4, 2011. Early registration ends Dec. 11, 2011.

Children whose **birth dates** fall between **May 1, 1993** and **April 30 2008** are eligible to play the PALL 2011 Spring Season.

NEW PLAYERS and/or PLAYERS WHO HAVE MOVED SINCE SPRING SEASON 2011:

In accordance with Little League rules and regulations the following PALL Spring Season players are **required** to register in person and are not permitted to register online:

- 1) **All new (Fall Ball does not apply) players to the League**
- 2) **Any existing player who has moved since their last season played**

At the time of registration all new players are required to provide both a birth certificate to show proof of age, and 3 separate proofs of residence. To those players who have moved since last spring season you must provide 3 proofs of residence. This is to insure that the player lives within PALL's official Little League boundaries. This documentation is the responsibility of the player's parent or guardian and not the responsibility of PALL officials. If it is discovered at any time that the information provided was inaccurate or false it could result in the player being ineligible for All Star participation.

PROGRAM SUMMARY:

TEE BALL – Ages 4-6 (Instructional)

MAJORS – Ages 10-12 (Instructional/Competitive)

ROOKIES – Ages 7-9 (Instructional)

JUNIORS – Ages 13-14 (Instructional/Competitive)

MINOR B – Ages 8-10 (Instructional)

SENIORS – Ages 15-16 (Instructional/Competitive)

MINOR A – Ages 9-11 (Instructional)

BIG – Ages 17-18 (Instructional/Competitive)

All Divisions: Game Days are T, W, TH, S; Number of Games: 20; Practice: Yes

Jersey/Cap/Socks Provided; Insurance: Yes

BASEBALL EQUIPMENT/UNIFORM:

Player will need: Baseball glove, baseball pants, baseball cleats, athletic supporter & cup, your own baseball helmet and bat are optional, PALL will provide at game time if needed.

PALL will provide: Baseball jersey, baseball hat, baseball socks, baseball helmet (if needed), and baseball bat (if needed).

FEES:

Early Online Registration *best deal!	\$115 per child plus online fees	\$95 each additional child plus online fees
After Dec 11th- Online Registration	\$140 per child plus online fees	\$120 each additional child plus online fees
Early Paper Registration – Ends Dec. 11th	\$140 per child	\$120 each additional child
After Dec. 11th –Paper Registration	\$165 per child	\$145 each additional child
Fundraiser BUY OUT	\$40 per child	\$160 for Jr/Sr (no fundraiser)
		\$185 for Jr/Sr (no fundraiser)

If you choose NOT to buy out you will be required to participate in the candy fundraiser (sell 52 candy bars for \$1ea).

ALL VOLUNTEERS:

This includes Managers, ALL Coaches, Team Parents, and Scorekeepers. All volunteers are REQUIRED to complete a "Volunteer Application" in order to participate in the PALL activities in the capacities listed above. This is a requirement of Little League and is for the safety of our players. Your Volunteer Application must be submitted prior to volunteering and must include an updated copy of the volunteer's driver's license. NO EXCEPTIONS. This form is available under "Handouts" on our website at www.pallbaseball.org.

DATES TO REMEMBER:

Nov 13	Walk-Up Registration 9:00am -12:00 noon Tierra Bonita Fields (by Snack Shack)
Nov 20	Walk-Up Registration 9:00am -12:00 noon Poway Community Center (by the baseball fields)
Dec 10	Walk-Up Registration 8:00am -11:00am, Midland Elementary (13910 Midland Road)
Dec 11	Early registration ENDS
Jan 14 & 21	Try Outs (Minor B, Minor A, Majors) (Juniors, Seniors, Big Divisions –TBA)
Jan 27	Team announcements
Jan. 30	Practice begins
Mar 3	Opening Day – Pancake Breakfast – Games Start



Poway American Little League (PALL) 2012 Spring Season Player Contract and Application

For additional information or to register online go to www.PALLbaseball.org.



No applicant will be permitted to participate in any PALL activity until this form has been completed in its entirety and all registration fees have been paid in full.

PLEASE PRINT CLEARLY

Player's Name: _____ Sex: M ___ F ___ Birth date: _____ Age: _____
Last Name First Name

Address: _____ Home Phone: (____) _____
Street City Zip

Family email address: _____ School: _____ Grade: _____
(This is our MAIN source of communication please print clearly)

Parents: _____
Father's or Guardian's Name Mother's or Guardian's Name

Phone: (H) _____ (Cell) _____ (H) _____ (Cell) _____
Father's Phones Mother's Phones

Spring 2011 my child played: *Circle one* N/A (new) Tee ball Rookies Minor B Minor A Majors
Juniors Seniors Big

If you are a NEW player (did not play Spring 2011) or if you have moved since the last spring season; see page 1 for important details.

Requests:

Please enroll my child in the following division:
 ___ TEE BALL (All 4 & 5yr olds most 6yr olds)
 ___ ROOKIES (generally 7- 9 yrs old)
 ___ MINOR B (generally 8-10 yrs old) Tryout **required**
 ___ MINOR A (generally 9-11 yrs old) Tryout **required**
 ___ MAJORS (generally 10-12 yrs old) Tryout **required**
 ___ JUNIORS (generally 13-14 yrs old) Tryout **required**
 ___ SENIORS (generally 15-16 yrs old) Tryout **required**
 ___ BIG (generally 17-18 yrs old) Tryout **required**

Please assign me to a team with:

Coach and friend request are for **Tee Ball and Rookies ONLY**.
 Requests will be made on a **first come first serve basis**.
 After a team is full **NO** request will considered.
 Friend Request: _____
 Coach Request: _____

Mother's Signature: _____ Father's Signature _____

Medical Insurance: _____ Policy Number: _____

Other Person to Notify in case of Emergency Name: _____ Phone: _____

<p><u>For League Use Only:</u></p> <p>Amount Received _____ Ck# _____</p> <p>Birth certificate verified by _____ <small>Required for <u>all</u> first time players</small></p> <p>Volunteered to: _____</p>	<p>Fundraiser Buy Out: ___ Yes ___ No</p> <p>Date Received _____ League Age: _____</p> <p>Residence verified by: _____ <small>Required for <u>all</u> first time players and players who <u>have moved since last season</u>.</small></p> <p>Volunteer Application received: ___ Yes ___ No</p>
---	--



Poway American Little League (PALL) 2012 Spring Season Player Contract and Application

For additional information or to register online go to www.PALLbaseball.org.



PARENT CONTRACT:

As the parent or legal guardian of the child named below, I hereby consent to abide by and ensure that my child will abide by all the rules, guidelines, policies and directives established by the Poway American Little League (PALL) and/or its member leagues and/or its lessors, of which my child may be a participant. Additionally, I will, to the best of my ability, attempt to ensure that members of my family and friends and relatives who may be directly or indirectly participating in PALL activities, will also abide by all the rules, guidelines, policies and directives established by the PALL and its member leagues of which my child may be a participant.

I understand that I may be asked to leave the premises of a PALL activity and/or my child may be suspended or expelled from a game, if, in the judgment of the PALL Board of Directors, my behavior is deemed to be (1.) inconsistent with this contract and/or (2.) the goals and philosophies of the PALL and/or (3.) is not in the best interest of the children, parents, spectators, etc. who may be directly or indirectly participating in a PALL activity and/or (4.) if my behavior is abusive or degrading and/or (5.) may cause harm or injury to people around me.

I further agree to the following:

1. I will NOT criticize, belittle or question the ability or authority of any official, coach or volunteer of the PALL.
2. I will in no way criticize, demean, belittle, mock, taunt or attempt to communicate with any UMPIRE, before, during or after a game or PALL activity. However, I may offer genuine praise and thanks for an umpire's performance as would be expected in and recognized as a showing or example of good sportsmanship.
3. I will control my emotions at games and events. I will not yell at or criticize other players, coaches, parents or officials. I will not act as "sit in the stands coach", and will keep my comments from the stands positive and will sit in the designated parent seating area.
4. I will not use foul language. I will not smoke or use tobacco products or partake of alcoholic beverages while on the premises of a PALL activity.
5. I will be responsible for the return, or replacement of, any jerseys and/or equipment, which is owned by the PALL and loaned, to my child.
6. Coach/Parent Relationship
 - A. I will NOT put pressure on a coach to:
 - 1). Play my child at a certain position.
 - 2). Play my child more than is required by the "Mandatory Play Rule".
 - 3). Alter his/her coaching style, technique, or coaching philosophy.
 - 4). Question an umpire's judgment or overall ability.
 - B. I will:
 - 1) Support the decision of my child's coach to play my child at any position the coach sees fit.
 - 2) Ensure that my child is on time for all games, practices and team activities.
 - 3) Attempt to control any negative behavior of my child as pointed out by his/her coach or PALL official.
 - 4) Encourage my child to play any position his/her coach recommends he/she play.
7. All grievances, problems, questions, etc. to be discussed with a PALL official will be carried on outside the presence of children or preferably accomplished off PALL premises in a personal meeting or through a telephone conversation.
8. I will respect a PALL official's right NOT to communicate with me "on the spur of the moment" about issues that may be potentially controversial or, under the circumstances, not in the immediate best interests of child participants.
9. When possible, I will volunteer my time and talents to support my child's participation in PALL activities.
10. I understand that all PALL games, practices and activities function under a "Recreational Philosophy", stressing sport as a FUN, healthy activity to be participated in for enjoyment and not for competitive advantage or personal achievement.
11. I will support the method and result of team formations within the PALL and understand that some teams may be "stronger" or "weaker" than others and I recognize this circumstance as being "common to the youth sports experience".
12. I will NOT recruit or solicit any PALL player for any non-PALL baseball activity.

Additionally, I authorize PALL to use any photograph or article about my child, or myself, for publicity purposes. I/we further acknowledge that I/we have read the refund and rainout policy and do hereby understand and agree to it. **I have read all of the above and understand and agree to all of the above conditions & policies, including any decisions made by PALL, which shall be considered to be final.**

Date Signed Father's or Guardian's Signature Date Signed Mother's or Guardian's Signature

LITTLE LEAGUE BASEBALL RISK/DANGER DISCLOSURE

The child (named above) AND his/her parents/guardians are hereby informed and warned that there are inherent risks and dangers associated with participation in youth baseball of any kind. You are further informed that you should expect injuries to occur such as sprains, bruises, and contusions and that there is a possibility for broken bones, concussions, and catastrophic injuries.

LITTLE LEAGUE BASEBALL RISK/DANGER ACKNOWLEDGMENT & CONSENT AND WAIVER AGREEMENT

As the parent(s) of (named above) I/We have read the above statement and fully acknowledge that I/We have been informed of the risks and dangers associated with my child's participation in Little League Baseball activities, and I/We hereby acknowledge that I/We fully understand the risks and dangers my child may be exposed to while participating in Little League Baseball. I/We further give my/our full consent and approval to my/our child to participate on a team in the PALL. I/We do hereby waive, release, absolve, indemnify, and agree to hold harmless the local team, league, conference and national baseball organizations, along with the organizers, sponsors, lessors, coaches and other elected or appointed officers and supervisors, participants, employees and persons transporting my/our child to and from any of activities, from and against any and all claims, costs, liabilities, expenses of judgment including attorney's fees and court costs arising out my child's participation in the PALL or one of its leagues, or illness or injury resulting there from, for any claim arising out of injury to my/our child, whether the result of negligence or any other causes, except for illness or injury resulting from gross negligence or willful misconduct by any of the above.

Date Signed Father's or Guardian's Signature Date Signed Mother's or Guardian's Signature



Poway American Little League (PALL) 2012 Spring Season Player Contract and Application

For additional information or to register online go to www.PALLbaseball.org.



Little League Baseball Medical Release

To be carried by any Regular Season or Tournament Manager together with team roster or eligibility affidavit.

Player: _____ Date of Birth: _____ Gender (M/F): _____

Player's Address: _____ City: _____ State/Country: _____ Zip: _____

Parent/Guardian Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Mobile Phone: _____

Parent/Guardian Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Mobile Phone: _____

PARENT OR GUARDIAN AUTHORIZATION:

In case of emergency, if family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel. (i.e. EMT, First Responder, E.R. Physician)

Family Physician: _____ Phone: _____

Address: _____ City: _____ State/Country: _____

Hospital Preference: _____

Parent Insurance Co: _____ Policy No.: _____ Group ID#: _____

League Name: Poway American Little League I.D. No.: 04053111

If parent(s)/guardian cannot be reached in case of emergency, contact:

Name	Phone	Relationship to Player
------	-------	------------------------

Name	Phone	Relationship to Player
------	-------	------------------------

Please list any allergies/medical problems, including those requiring maintenance medication. (i.e. Diabetic, Asthma, Seizure Disorder)

Medical Diagnosis:	Medication:	Dosage:	Frequency of dosage:

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.

Date of last Tetanus Toxoid Booster: _____

Mr./Mrs./Ms. _____
Authorized Parent/Guardian Signature

WARNING: Protective equipment cannot prevent all injuries a player might receive while participating in baseball. Little League does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, sexual preference or religious preference.