

SYBL REGISTRATION FORM

P.O. Box 588 / Smyrna, TN 37167

Date Application Returned: _____ / _____ / _____

-Please PRINT legibly. -Fill out this form completely. -Bring this form and players BIRTH CERTIFICATE with you at time of registration. -A Parent Handbook will be given to you at time of registration; your signature below will denote you receiving this book. -Board Meeting times will be posted at the Concession Stand.

FEE:

Fall: 9-18 yr olds \$60.00

PAYMENT:

Amount Cash: _____

Amount Check: _____

Check #: _____

Payment Accepted by: _____

(SYBL Board Member's Initials)

League Playing Age: _____

*** (Players Age on April 30, 2008) ***

PLAYER UNIFORM: (Please Circle Sizes) (League use - ____ / ____)

FALL

Shirt Size: Youth Sizes: S M L XL or Adult Sizes: S M L XL XXL XXXL

DEMOGRAPHICS:

Player Name: _____ Birth Date: _____

Address: _____ Birth Cert #: _____

REQUIRED YEARLY

City, State & Zip: _____ Home Phone: _____

E-Mail Address(es): _____

Dad: Name: _____ Work #: _____ Cell#: _____:

Mom: Name: _____ Work #: _____ Cell#: _____:

Please read the following paragraph carefully and sign below.

I, the undersigned, hereby indemnify defend and hold harmless the City of Smyrna, its appointed or elected officials, employees, agents and each of them for any and all suits, actions, legal or administrative proceedings, claims, demand, liabilities, interest, attorney's fees, cost and expenses of whatsoever kind of nature, arising out of my (my child or dependent) participating in this program. I further recognize the authority of the League Board of Directors and Town of Smyrna Parks and Recreation Department staff to remove any coach, player, umpire, spectator from any facility and or event if deemed necessary in order to assure compliance with the Town of Smyrna Parks and Recreation Departments Rules and Regulations and to assure the well being of park users, programs, town facilities and citizens. Recognizing this authority I hereby hold the Town of Smyrna and its designees and appointees harmless. I further verify that this signature insures that I am covered by an accident or medical insurance policy.

Medical Treatment: In the event my child is injured at a practice or game and I/we cannot be contacted, I/we give his/her coach, or their designee permission to seek medical treatment for my child.

Father: _____

(Please print)

Mother: _____

(Please print)

PLAYER'S NAME: _____

MEDICAL NOTES:

Please list below any medical concerns the League should know for the above listed player.

GENERAL INFORMATION:

1. Did this player play in the Smyrna Youth Baseball League at Todd Lane **Spring Season 2007?**

No: __ Yes: __

Which team / age division?

Head Coaches name?

} _____

2. Will this player still be in the same age division?

No: ____ Yes: ____:

→ Will this player still be in the same League (American/National)? (National applies to 9-10 yr olds only)
No: __ Yes: __:

→ 3 Do you want this player on the same team as last spring?
No: _ Yes: __

4. Is this child playing in another League or with another team outside SYBL?
No: _____ Yes: _____

The Player Enters / RE-Enters the Draft.

TRYOUTS (DRAFT):

Player Will Need to Tryout / Enter the Draft If:

Player is moving up in Age Division

Player is attempting to move from National League to American League. (9-10 yr olds only)

Player wants to change teams within the American League. (See #3 under General Information)

SPECIAL REQUESTS:

List all other restrictions or Special Requests: (All requests are subject to SYBL Board approval)

ADULT PARTICIPATION

PARENTS/GUARDIANS ARE REQUIRED TO AT LEAST WORK ONE ROTATION IN THE CONCESSION STAND EACH SEASON. IF THERE ARE NOT ENOUGH PARENTS/GUARDIANS FROM YOUR TEAM VOLUNTEERING IN THE CONCESSION STAND, A WIN MAY BE REMOVED FROM YOUR TEAMS STANDINGS.

PARENT / GUARDIAN SIGNATURE

PLAYERS NAME: _____

PARENTS CODE OF ETHICS

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

_____ I will encourage good sportsmanship by demonstrating positive support for ALL players,
Parents Initials coaches, and officials at every game, practice, or other youth sports event.

_____ I will place the emotional and physical wellbeing of my child ahead of my personal desire to
Parents Initials win.

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

_____ I will require that my child's coach be trained the responsibilities of being a youth sports coach
Parents Initials and that the coach upholds the Coaches Code of Ethics.

_____ I will support coaches and officials working with my child in order to encourage a positive and
Parents Initials enjoyable experience for all.

_____ I will demand a sports environment for my child that is free from drugs, tobacco, and alcohol
Parents Initials and will refrain from their use at all sports events.

_____ I will remember that the game is for the youth - not adults.
Parents Initials

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

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

_____ I will help my child enjoy the youth sports experience by doing whatever I can, such as being a
Parents Initials respectful fan, assisting with coaching, or providing transportation.

_____ I understand that Smyrna Recreation Parks policy prohibits smoking in ball complexes except
Parents Initials for designated areas and that no animals are permitted in ball complexes on game days, unless they are official service animals.

_____ I understand that the Smyrna Parks Department and Smyrna Youth Baseball League fully
Parents Initials enforces the Zero (0) Tolerance Policy of misbehavior by any parent, coach, fan, player, board member, & official.

_____ *Failure to uphold the Parents Code of Ethics and non-compliance with Smyrna Parks Rules and
Parents Initials regulations may result in one or more of the following actions: Warning and/or apology;
Written essays on value of sportsmanship; Probation; One game suspension; Multiple game suspensions, Season suspension, or Permanent suspension.*

Parent Signature

Date