DIVISION: TBALL___ 8U___10U___12U___14U___18U___



WEST SACRAMENTO GIRLS SOFTBALL 2020 SPRING BALL REGISTRATION T-ball \$100

8U and up: \$150 for 1 player,

\$100 each additional player in same Household,

\$100 deposit for volunteer fee per family (this will be refunded at the end of the season if 4 hours of volunteer time is met)

Includes: Team Shirt, Visor, Insurance, Team Photo and Trophy West Sac Girls Softball * P.O. Box 1762 * West Sac., CA 95691 * *****PLEASE FILL OUT THE FORM CLEARLY****

PLAYER INFORMATION:										
FIRST NAME:				MIDDLE: LAS			LAST N	ST NAME:		
PHONE #:				EMAIL ADDRESS:						
PHONE #.				EIVIAIL ADDRESS.						
ADDRESS:					MEDICAL NUMBER:					
CTATE TO CORE				DF	DOCTOR'S NAME & PHONE NUMBER:					
CITY:	TY: STATE ZIP CO			DOCTOR'S NAME & PHONE			NE NOWBER:			
DATE OF BIRTH:	AGE ON JANUARY 1,2			2019:	YEARS PLAYED:				GRADE/SCHOO	L NAME:
										_
SHIRT SIZE: (YOUTH) SMALL MEDIU	M I A D C E	E (ADIIIT) S	CNAALL N	MEDILIM LADGE V	I A D G I	VVIADGE	(circle o	no)		
SHINT SIZE. (TOOTH) SIVIALE IVIEDIO	IVI LANGE	E (ADOLI) 3	DIVIALL	VIEDIOIVI LANGE X-I	LANGI	XX-LANGE	(circle o	ne)		
HAS YOUR DAUGHTER EVER PITCHE	D? Y	YES or	NO		HOW MANY INNINGS/YEARS PITCHING:					
HAS YOUR DAUGHTER EVER CAUGH	T? Y	YES or	NO		HO			ARS CATCHING:		
GUARDIAN NAME:						GUARDIAN	I NAME:			
GUARDIAN'S CELL/ PHONE NUMBER	R:					GUARDIAN	l'S CELL/	PHONE NUMBE	R:	
, , , , , , , , , , , , , , , , , , , ,	-						,			
EMERGENCY CONTACT NAME: EMERGENCY CONT			NTACT CELL/PHONE	NE NUMBER: EMERGENCY			EMERGENCY F	RELATIONSHIP TO	PLAYER:	
KNOWN MEDICAL CONDITIONS:										
KNOWN WEBICAL CONSTITUTIONS.										
I hereby give my permission	for my o	child to b	e atte	nded to by eme	rgen	cy medica	l techn	icians or oth	er qualified m	edical personnel,
and if required to be transpo	-			-	-	-			-	•
					-			-		
participating in any activity sponsored by or associated with the West Sacramento Girls Softball program. I hereby agree to indemnify and hold harmless the West Sacramento Girls Softball, its Board of Directors, officers, directors, agents, representatives,										
team managers, coaches, and the City of West Sacramento from and against all claims, liabilities, damages or causes of action arising										
out of or in connection with my child's participation in any and all activities sponsored by the West Sacramento Girls Softball.										
Initial										
We agree to abide by the Code of Conduct regarding players, parents and spectators, and agree to support the philosophy of the										
West Sacramento Girls Softk	Jan.								Initial	Initial
We may use your child's pho	to for s	noncor a	dvarti	sing our wobsite	0 20/	d/or Eacoh	nook		<u></u>	1111tiai
we may use your cima's prio	נט וטו אן	polisoi a	uvertis	sing, our websiti	e and	a/or races	JOOK.			
Davant/Counding Cinnatons				Data						
Parent/Guardian Signature:_				Date	::			_		
For Donal House has										
For Board Use only: Payment Information:										
•		6 1				-			/ / 1	
Check #Amount \$		casn		Amount \$		L	vate	Pa	<u>yments Y/N</u>	
Board Member Initials										
Birth Certificate Certified Proof of Residence Verified (or WUSD Student)										

DIVIDION. 1D/100 100 120 140 100	DIVISION: TBALL	8U	10U	12U	14U	18U	
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Parent/Spectator Code of Conduct:

We, the West Sacramento Girls Softball, have implemented the following Parent/Spectator Code of Conduct to provide the proper guidance regarding the proper role of parents/spectators in supporting their child in sports. Parents must read, understand and sign this form prior to their children participating in our league. Any parent guilty of improper conduct at any game or practice will be asked to leave the sports facility and be suspended from the following game. Repeat violations may cause a multiple game suspension, or the season forfeiture of the privilege of attending all games.

Preamble: the essential elements of character-building and ethics in sports are embodied in the concept of sportsmanship and six core principles:

• Trustworthiness, • Respect, • Responsibility, • Fairness, • Caring and • Good Citizenship

The highest potential of sports is achieved when competition reflects these "six pillars of character." I therefore agree:

- 1. I will not force my child to participate in sports.
- 2. I will remember that children participate to have fun and that the game is for youth, not adults.
- 3. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
- 4. I will learn the rules of the game and the policies of the league.
- 5. I (and my guests) will be a positive role model for my child and encourage sportsmanship by showing respect and courtesy, and by demonstrating positive support for all players, coaches, officials and spectators at every game, practice or other sporting event.
- 6. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parent such as booing and taunting; refusing to shake hands; or using profane language or gestures.
- 7. I will not encourage any behaviors or practices that would endanger the health and wellbeing of the athletes.
- 8. I will teach my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
- 9. I will demand that my child treat other players, coaches, officials and spectators with respect regardless of race, creed, color, sex or ability.
- 10. I will teach my child that doing one's best is more important than winning, so that my child will never feel defeated by the outcome of a game or his/her performance.
- 11. I will praise my child for competing fairly and trying hard, and make my child feel like a winner every time.
- 12. I will never ridicule or yell at my child or other participants for making a mistake or losing a competition.
- 13. I will emphasize skill development and practices and how they benefit my child over winning. I will also de-emphasize games and competition in the lower age groups.
- 14. I will promote the emotional and physical wellbeing of the athletes ahead of any personal desire I may have for my child to
- 15. I will respect the officials and their authority during games and will never question, discuss, or confront coaches at the game field. I will observe a mandatory "24-hour cooling off" period following a game to discuss any issue I or my child may have regarding the game. After the 24-hour period, I may contact the coach to arrange a time to privately discuss the issue.
- 16. I will demand a sports environment for my child that is free from drugs, tobacco, and alcohol and I will refrain from their use at all sports events.
- 17. I will refrain from coaching my child or other players during games and practices, unless I am one of the official coaches of the team.

Drugs & Alcohol Zero Tolerance:

I understand that the policy of West Sacramento Parks and Recreation prohibits use of alcohol, drugs, tobacco on any school property. I am responsible for notifying family and guests that attend WSGS activities of this policy. I understand that WSGS can request that any person in violation remove him/herself immediately from the premises, and may be banned from WSGS for duration specified by the board.

Discrimination Policy:

WSGS does not limit participation in its activities on the basis of disability, race, color, national origin, gender, sexual preference or religious preference.

Parent/Guardian Signature	
Player Name and Division	Mest Sac