

# Player

•						
Last		First	First		Date	
Home Address	Home Address Street				Birthdate MM/DD/YY	ΥY
City	State	Zip coo	de		□ New	
Oily	Oldic	Zip code			☐ Returning	
Home Phone	ie Phone Cell		none			
School Attending during Season		Uniform Shirt Size (Youth Small – Adult Large)		Hardship Request  ☐ Yes ☐ No GDRD Request Sent ☐ Yes ☐ No		
Parent/Guardian						
Last		!	First		Phone	
Relationship to Player			Email			
Last			First		Phone	
Relationship to Player			Email			
Medical		Informa	ation pro	ovided is Comple	te and Correct:	_ initial
Family Physician			Physician Phone			
Preferred Hospital			Physical Impairments			
Health Plan			Health Plan #:			
Emergency Contact		Informa	ation pro	ovided is Comple	te and Correct:	_ initial
Contact Name			Relationship to Player			
Phone Number □ Cell □ Home			Comments			
Payment						
Early Bird:		\$75/\$85/	/\$95	Official Use:		
Regular:		\$95/\$105/		Paid by: C	ash□ Check□ #	
		\$115/\$12	5/\$135		Receipt #:	
Late.		+\$40.00				
Service Hours E	Buy Out Fee:					
				Board	Member Initials:	



#### **League Boundaries**

Each recreational league has defined boundaries which are approved by ASA. I am aware of the boundaries of this league and I certify that I live within the boundaries of this league. I understand that if I play in a league outside my boundaries, I will be ineligible for All-Stars and Winterball.

If I am unaware of the boundaries of this league, it is my responsibility to ask the league for clarification. In addition, if the validity of my address is questioned, I understand I can be asked to show proof of residency.

I understand that if I play in a league outside my boundaries, I will be ineligible for All-Stars and Winterball.

\_\_\_Initial here to verify that you have read and agree to the terms and conditions that govern your involvement with Gold Country Girls Softball.

# Gold Country Girls Softball Account Creation/Update

It is understood that the information provided here will be used to create an online account with Gold Country Girls Softball to reflect your registration, enrollment, and will be used to provide communication to your Player's team and coaching staff. You will be emailed on account creation and registration. If you already have an account with Gold Country Girls Softball, this information will be used to update your account to reflect your registration and enrollment.

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# **Required Service Hours**

I understand, as the Parent and/or Legal Guardian of the above-named child, that I am responsible for contributing four (4) service hours to the GCGS league to help with opening day activities, field maintenance, tournament, and/or snack bar service. This option is provided to keep player registration costs low for families. I will only be required to contribute 4 service hours regardless of how many of my players are registered each season. I can designate other adults to help in serving my hours as long as they appear to help as scheduled.

I am responsible for serving these hours at my earliest convenience or opt out by paying the league fee of forty (40) dollars at time of registration.

If I do not pay the 'opt out' fee at registration, I will be required to provide a check (made out to GCGS) in the amount of \$40.00 when I pick up my player's uniform on or before opening day. The league will hold my check until I have completed my four (4) hour service, at which time, the check will be returned to me or destroyed upon request. If I do not complete my service hours by the end of the season, my (\$40) check will be deposited into the league account for use.

T-Ball parents/guardians are exempt from this service requirement. However, older sibling players will mean that I still fulfill this requirement.

<u>Coaches/managers/board members are exempt</u> from this service since they are volunteering their time to the league already.

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# Youth Sports and Concussions (Assembly Bill 2007)

Since 2012, per Assembly Bill 25, all schools with sports programs have been required to immediately remove an athlete from an athletic activity for the remainder of the day if the athlete is suspected of sustaining a concussion or head injury, and prohibits the athlete from returning to the athletic activity until the athlete is evaluated by a licensed health care provider, trained in the management of concussions, and acting within the scope of his or her practice, and the athlete receives written clearance from the licensed health care provider to return to the athletic activity. This law also requires, on a yearly basis, a concussion and head injury information sheet to be signed and returned by the athlete and athlete's parent or guardian before the athlete's initiating practice or competition.

A new law went into effect on January 1, 2017. Assembly Bill 2007 now applies these same regulations to <u>athletes</u> <u>participating in youth sports organizations</u> as well. This bill requires youth sports organizations to:

- **Remove an athlete** who may have a concussion during a practice or game to be removed from the activity for the remainder of the day.
- Any athlete removed for this reason must receive a written clearance note from a medical doctor trained in the
  management of concussion before returning to practice, and after completion of the Return to Learn and
  Return to Play Protocols.
- Before an athlete can start the season and began practice in a sport, a **concussion information sheet** must be signed and returned to the league by the parent/guardian.
- Provide all coaches and administrators with training on concussions, and document completion and understanding of this training.

However, AB 2007 has not yet provided specific educational material, tools, information sheets or protocols for youth sports organizations. Until such material is provided, USA Softball of Sacramento and all participating leagues/teams will use the material currently available by the California Interscholastic Federation to all schools as part of AB 25, which fulfills all areas of this new law.

Accordingly, please visit one of the links below for a free course that is available on concussions.

- 1. NFHS Learning Center Concussion in Sports Training [http://nfhslearn.com/courses/61064/concussion-in-sports]
- 2. Heads Up Concussion Training [https://www.cdc.gov/concussion/HeadsUp/youth.html]

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## Gold County Girls Softball (GCGS) Code of Conduct

I understand that my responsibilities as a parent/guardian of a GCGS player are of great importance, and that my actions have the potential to significantly influence my child. Therefore, I promise to uphold the following to the best of my ability:

- I acknowledge my child's right to participate at a level commensurate with his/her maturity and ability.
- I acknowledge my child's right to share in the leadership and decision-making of his/her sport participation.
- I will treat each athlete, coach, manager, umpire, parent, and spectator with respect and dignity.
- I will encourage good sportsmanship by demonstrating positive support for all players, coaches, managers and other officials at every game, practice or other softball-related events.
- I will place the emotional and physical well-being of all children ahead of my personal desire to win.
- I will insist that my child play in a safe and healthy environment.
- I will support coaches, managers and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- I will remember that coaches/managers are volunteering their time.
- I will do my best to make softball fun for my child and her teammates.
- I will help my child enjoy her softball experience by being a respectful fan and supporting parent. (Please keep comments to yourself; you never know who is sitting next to you!)
- I will treat other players, coaches, managers, fans and umpires with respect regardless of race, sex or ability.
- I will remember the game is for youth, not adults. Remember these are children, not professional athletes.

I am aware that there will be consequences for not upholding the above. The Team Managers and umpire(s) have the right to ask any parent or spectator to leave if they act in an unsportsmanlike manner. Further action may also be taken if necessary. I understand that NORCAL and GCGS prohibit the use of tobacco products and/or the consumption of alcoholic beverages and illegal drugs by players, staff and spectators during practices, games, or other activities where players are present. GCGS cannot tolerate any indication of use of intoxicating beverages or substances, even prior to attending GCGS activities.

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# Gold County Girls Softball (GCGS) Consent/Permission:

I, as Parent and/or Legal Guardian of above-named child, give my consent for her to participate in Gold County Girls Softball for the 2023 season. It is fully understood by me that GCGS, its board members, organizers, sponsors, supervisors, or parental support team are in no way responsible for any risks, accidents or legal responsibilities incurred during this or related activity by above registered player, and agree to release GCGS from any and all responsibilities. I hereby give permission for this child to be admitted into a hospital or to be treated by a physician for any injury that may occur while playing, being transported to or from, or as a spectator to any activity associated with Gold Country Girls Softball.

I, as a Parent and/or Legal Guardian of above named child, give my consent for her Gold Country Softball photos to appear on our league website.

I have carefully read the above Code of Conduct AND Consent/Permission and fully understand its contents. I am aware that this is a release of liability and agreement to indemnify GCGS, and I sign it of my own free will.

Signature	Print Name	Date	
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