

Participant Information
Sports Application

2016 Spring Youth

Last Name _____ First Name _____

Date of Birth _____ Grade _____ Male Female

Address _____ City _____

Phone #1 _____ Phone #2 _____ Work Phone _____

Parent's or Guardian's Names _____

Email _____ (Email may be used to update practice & game information.)

Emergency Contact Information

Name _____ Relationship _____

Primary Phone _____ Secondary Phone _____

Emergency Instructions

Allergies / Other

Restrictions _____

Family Doctor _____ Phone _____ Hospital _____

Softball/Baseball (Check One) Coed T-Ball/Coach Pitch: Age 5 by Sept. 1 - Grade 2 \$30.00

Softball - 3rd - 6th Grade \$50.00

Baseball - 3rd - 6th Grade \$50.00

Participant's Shirt Size (Circle One) Youth: Sm Med Lg
Adult: Sm Med Lg XL 2XL

YES - I am interested in sponsoring a team. YES - I am interested in coaching.

YES or NO - My contact information can be included on the team roster.

Payment Information: Please drop balance or full payment at Brownsville City Hall at 255 N. Main Street. IF NOT ABLE TO PAY IN FULL AT THIS TIME PLEASE FILL OUT A SCHOLARSHIP APPLICATION OR INDICATE WHEN YOU WILL BE ABLE TO PAY.

Consent: I have read, have understood the implications of the documents provided, agreed to abide by future decisions of CLRA representatives and signed the Parent/Athletic Concussion Information Sheet, the Spectator's Code of Conduct & the Participant's Code of Conduct.

I hereby give permission for the above named youth to participate in any sport or activities taking place under the supervision of the Central Linn Recreation Association. I release the Central Linn Recreation Association and their volunteers from any liability should any accident or injuries occur.

Parent's or Guardian's Signature: _____ Date: _____

For Office Use Only: Date Application Received: _____ By _____

Code of Conduct Signed Concussion Form Signed Paid Amount \$ _____

Cash Check # _____ Date of Payment _____

Scholarship Form Attached _____ Scanned By/Date _____



PARTICIPANT RESPONSIBILITIES & CODE OF CONDUCT

Central Linn Rec Center Youth Activities Player Code of Ethics Pledge

Each player age nine (9) and older is required to read and sign the following document. For the younger players it is the coach's responsibilities to read this pledge to his or her team members, and be sure the players understand their responsibilities.

- ▶ I will take responsibility for my own behavior and learn to speak for myself and listen to others.
- ▶ I will always treat my opponents with respect; without opponents there is no game.
- ▶ I will treat my coach with respect, and acknowledge and appreciate the time and effort volunteered by my coach.
- ▶ I will play hard, know the rules of the game and play by them.
- ▶ I will respect the game officials and their judgment, and accept their decisions without argument even if they may have made a mistake.
- ▶ I will exercise self-control at all times and display no behavior, which could incite fans. I will win without boasting, lose without excuses and give my best effort. I will refrain from the use of alcohol, drugs and tobacco at all times.
- ▶ I will remember that I am just one portion of a team effort. I will do my best but not at the expense of other teammates. I will recognize that unselfish teamwork is more important than individual accomplishments.
- ▶ I will condition myself to prevent injury by stretching and warming up before each game.
- ▶ I will always shake hands and acknowledge a good game with my opponent.

I understand that unacceptable behavior (continual tardiness to practice or games, skipping practice or games, cussing or foul language, fighting, and other behavior that takes away from team unity) is not tolerated and I will refrain from taking part in any of this behavior during practices and games. If I break the rules, I understand that I may be corrected by my coach and/or representatives from CLRA and may receive suspensions for rules violations and misconduct.

I will return my uniform at the end of the season, if asked to.

Player's Signature

Date



SPECTATOR/PARENT CODE OF CONDUCT

Central Linn Rec Center Spectator / Parent Code of Ethics Pledge

- ▶ I hereby pledge to provide positive support, care, and encouragement for my child participating in Youth Activities by the following Code Of Ethics.
- ▶ I will encourage good sportsmanship by demonstrating positive support for all participants, coaches, officials, supervisors and volunteers at every youth activity and event.
- ▶ 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, officials, supervisors and volunteers working with my child to provide a positive, enjoyable experience for all.
- ▶ I will promote a drug, alcohol and tobacco free activities environment for my child and agree to assist by refraining from their use at all youth events.
- ▶ I will remember that the game is for children and not for adults. I will do my best to make youth activities fun for my child.
- ▶ I will ask my child to treat other participants, coaches, fans, officials and supervisors with respect regardless of race, sex, creed or ability.
- ▶ I will promise to help my child enjoy the youth sports/activities experience within my personal constraints by assisting with volunteering, being a respectful fan, providing transportation or whatever I am capable of doing.
- ▶ I will respect the game officials and their judgment and accept their decisions without argument, even if they may have made a mistake.
- ▶ I will help my child and coach with the preparations before an event and the clean up after the event is concluded.
- ▶ I will contact the coach if my child will be missing practice or a game.
- ▶ I understand that I am responsible for my child directly before and after all scheduled activities **and will be on time to deliver and pickup my child.**

I understand that any unacceptable behavior (continual tardiness to practice or games, skipping practice or games, cussing or foul language, fighting, and other behavior) is not tolerated and I will refrain from taking part in any of this behavior during practices and games. If I break the rules, I understand that I may be corrected by representatives from CLRA and may be asked to leave playing areas for rules violations and misconduct.

Spectator/Parent's Signature

Date



Parent/Athlete Concussion Information Sheet

A concussion is a type of traumatic brain injury that changes the way the brain normally works. A concussion is caused by bump, blow, or jolt to the head or body that causes the head and brain to move rapidly back and forth. Even a “ding,” “getting your bell rung,” or what seems to be a mild bump or blow to the head can be serious.

WHAT ARE THE SIGNS AND SYMPTOMS OF CONCUSSION?

Signs and symptoms of concussion can show up right after the injury or may not appear or be noticed until days or weeks after the injury.

If an athlete reports **one or more** symptoms of concussion listed below after a bump, blow, or jolt to

Did You Know?

- Most concussions occur *without* loss of consciousness.
- Athletes who have, at any point in their lives, had a concussion have an increased risk for another concussion.
- Young children and teens are more likely to get a concussion and take longer to recover than adults.

the head or body, s/he should be kept out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says s/he is symptom-free and it’s OK to return to play.

SIGNS OBSERVED BY COACHING STAFF

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets an instruction
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (*even briefly*)
- Shows mood, behavior, or personality changes
- Can’t recall events *prior* to hit or fall
- Can’t recall events *after* hit or fall

SYMPTOMS REPORTED BY ATHLETES

- Headache or “pressure” in head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, foggy, or groggy
- Concentration or memory problems
- Confusion
- Just not “feeling right” or “feeling down”

CONCUSSION DANGER SIGNS

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. An athlete should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that not only does not diminish, but gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (*even a brief loss of consciousness should be taken seriously*)

WHY SHOULD AN ATHLETE REPORT THEIR SYMPTOMS?

If an athlete has a concussion, his/her brain needs time to heal. While an athlete's brain is still healing, s/he is much more likely to have another concussion. Repeat concussions can increase the time it takes to recover. In rare cases, repeat concussions in young athletes can result in brain swelling or permanent damage to their brain. *They can even be fatal.*

Remember

Concussions affect people differently. While most athletes with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

WHAT SHOULD YOU DO IF YOU THINK YOUR ATHLETE HAS A CONCUSSION?

If you suspect that an athlete has a concussion, remove the athlete from play and seek medical attention. Do not try to judge the severity of the injury yourself. Keep the athlete out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says s/he is symptom-free and it's OK to return to play.

Rest is key to helping an athlete recover from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games, may cause concussion symptoms to reappear or get worse. After a concussion, returning to sports and school is a gradual process that should be carefully managed and monitored by a health care professional.

It's better to miss one game than the whole season. For more information on concussions, visit: www.cdc.gov/Concussion.

Student-Athlete Name Printed

Student-Athlete Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date



Hoja informativa para los deportistas y sus padres acerca de las conmociones cerebrales

Una conmoción es un tipo de lesión cerebral traumática que ocasiona cambios en la forma en que funciona el cerebro normalmente. Una conmoción es causada por un golpe, impacto o sacudida en la cabeza o el cuerpo que hace que la cabeza y el cerebro se muevan rápida y repentinamente hacia adelante y hacia atrás. Hasta un "chichoncito" o lo que pareciera ser tan solo un golpe o una sacudida leve en la cabeza pueden ser algo grave.

¿CUÁLES SON LOS SIGNOS Y SÍNTOMAS DE UNA CONMOCIÓN CEREBRAL?

Los signos y síntomas de una conmoción cerebral pueden aparecer justo después de una lesión o puede que no aparezcan o se noten sino hasta días o semanas después de ocurrida la lesión.

Si un deportista presenta **uno o más** de los síntomas de una conmoción cerebral indicados a continuación,

¿Sabía usted que...?

- La mayoría de las conmociones cerebrales ocurren sin pérdida del conocimiento.
- Los deportistas que han sufrido una conmoción cerebral en algún momento de sus vidas, tienen un mayor riesgo de sufrir otra.
- Los niños pequeños y los adolescentes tienen más probabilidad de sufrir una conmoción cerebral y de que les tome más tiempo recuperarse que los adultos.

luego de un golpe, impacto o sacudida en la cabeza o el cuerpo, no se le debe permitir continuar jugando el día de la lesión y no debe volver a jugar hasta que un profesional médico con experiencia en evaluación de conmociones cerebrales indique que ya no presenta síntomas y que puede volver a jugar.

SIGNOS OBSERVADOS POR EL PERSONAL DE ENTRENAMIENTO

- Parece aturdido o desorientado
- Está confundido en cuanto a su posición de juego
- Olvida las instrucciones
- No está seguro del juego, de la puntuación o de adversarios
- Se mueve con torpeza
- Responde a las preguntas con lentitud
- Pierde el conocimiento (aunque sea por poco tiempo)
- Muestra cambios de ánimo, comportamiento o personalidad
- No puede recordar lo ocurrido antes del golpe o caída
- No puede recordar lo ocurrido después del golpe o caída

SÍNTOMAS REPORTADOS POR LOS DEPORTISTAS

- Dolor de cabeza o "presión" en la cabeza
- Náuseas o vómitos
- Problemas de equilibrio o mareo
- Visión borrosa o doble
- Sensibilidad a la luz
- Sensibilidad al ruido
- Sentirse débil, desorientado, aturdido, atontado o grogui
- Problemas de concentración o de memoria
- Confusión
- No "sentirse bien" o "con ganas de no hacer nada"

SIGNOS DE PELIGRO POR UNA CONMOCIÓN CEREBRAL

En casos poco frecuentes, en las personas que sufren una conmoción cerebral puede formarse un coágulo de sangre peligroso que podría hacer que el cerebro ejerza presión contra el cráneo. Un deportista debe recibir atención médica de inmediato si luego de sufrir un golpe, impacto o sacudida en la cabeza o el cuerpo presenta alguno de los siguientes signos de peligro:

- Una pupila está más grande que la otra
- Está mareado o no se puede despertar
- Dolor de cabeza que es persistente y además empeora
- Debilidad, entumecimiento o menor coordinación
- Náuseas o vómitos constantes
- Dificultad para hablar o pronunciar las palabras
- Convulsiones o ataques
- No puede reconocer a personas o lugares
- Se siente cada vez más confundido, inquieto o agitado
- Se comporta de manera poco usual
- Pierde el conocimiento (las pérdidas del conocimiento deben considerarse como algo serio aunque sean breves)

¿POR QUÉ DEBE UN DEPORTISTA NOTIFICAR A ALGUIEN SI TIENE SÍNTOMAS?

Si un deportista sufre una conmoción, su cerebro necesitará tiempo para sanar. Cuando el cerebro de un deportista se está curando, tiene una mayor probabilidad de sufrir una segunda conmoción. Las conmociones repetidas (o secundarias) pueden aumentar el tiempo que toma la recuperación. En casos poco frecuentes, repetidas conmociones

Recuerde

Las conmociones cerebrales afectan a las personas de manera diferente. Si bien la mayoría de los deportistas que sufren una conmoción cerebral se recuperan en forma completa y rápida, algunos tienen síntomas que duran días o incluso semanas. Una conmoción cerebral más grave puede durar por meses o aún más.

cerebrales en los jóvenes deportistas pueden ocasionar inflamación del cerebro o daño cerebral permanente. Incluso pueden ser mortales.

¿QUÉ DEBE HACER SI CREE QUE SU DEPORTISTA HA SUFRIDO UNA CONMOCIÓN CEREBRAL?

Si considera que un deportista tiene una conmoción cerebral, sáquelo del juego y busque atención médica de inmediato. No intente juzgar usted mismo la seriedad de la lesión. No permita que el deportista regrese a jugar el mismo día de la lesión y espere a que un profesional médico con experiencia en la evaluación de conmociones cerebrales indique que ya no presenta síntomas y que puede volver a jugar.

El descanso es la clave para ayudar a un deportista a recuperarse después de una conmoción cerebral. Durante el ejercicio o las actividades que requieran de mucha concentración, como estudiar, trabajar en la computadora o los juegos de video, pueden causar que los síntomas de la conmoción cerebral reaparezcan o empeoren. Después de una conmoción cerebral, volver a practicar deportes y regresar a la escuela debe ser un proceso gradual que tiene que ser controlado y observado cuidadosamente por un profesional médico.

Mejor perder un juego que toda la temporada. Para más información sobre la conmoción cerebral, visite: www.cdc.gov/Concussion.

Nombre del estudiante o deportista

Firma del estudiante o deportista

Fecha

Nombre del padre o tutor legal

Firma del padre o tutor legal

Fecha