

## Little League Baseball® Medical Release

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



Player:	Date of Birth:		
eague Name: <b>Nort</b> l	n Oldham Little Leagu	e I.D. Numb	er: <b>03170222</b>
arent or Guardian A	authorization:		
in case of emergence child to be treated by Physician) Family Physician:		not be reached, ersonnel. (i.e. El	MT, First Responder, E.R.
Address:			
Hospital Preference:	na ng masa spina lata ka dasah Ng masa		na kata katang menggalah Managan menggalah
In case of emergenc	y contact:		
Name		Phone	Relationship to Player
Yame			
Name		Phone	Relationship to Player
Please list any allerg medication. (i.e. Dia	ies/medical problems, ir betic, Asthma, Seizure [	ncluding those re Disorder)	equiring maintenance
Medical Diagnosis	Medication	Dosage	Frequency of Dosage
The second se			
ELECTRIC ELECTRICES TEN			Rua I en
The purpose of the a have details of any r	above listed information medical problem which n	is to ensure tha nay interfere wil	t medical personnel th or alter treatment.
Date of last Tetanus	Toxoid Booster:		
Mr./Mrs./Ms.			
WARNING: Protective equip	Authorized Parent/Guard ment cannot prevent all injuries a not limit participation in its activi	player might receive	while participating in Baseball/Softba

BOTH PARENTS NEED TO READ AND SIGN MEDICAL RELEASE AND THE LEAGUE CODE OF CONDUCT ON BACK AND RETURN TO THE MANAGER BEFORE THEY BEGIN PRACTICE.

## NORTH OLDHAM LITTLE LEAGUE PARENTS CODE OF CONDUCT

All parents are to read this, sign it and follow it

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 to 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 the youth not the 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 polices 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 demonstrating positive support for all the players, coaches, officials and spectators at every game, practice or other sporting events.
- 6. I(and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parents such as booing, taunting: refusing to shaking hands or using profane language or gestures.
- 7. I will not encourage any behaviors or practices that would endanger the health and well being 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 winner every time.
- 12. I will never ridicule or yell at my child or other participant for making a mistake or losing a competition.
- 13. I will emphasize skill development and practices and they benefit my child over winning.
- 14. I will promote the emotional and physical well being of the athletes ahead of any personal desire I may have for my child to win.
- 15. I will respect the officials and their authority during the games and will never question, discuss or confront the coaches at the game field and will take time to speak with coaches at an agreed upon time and place.
- 16. I will refrain from coaching my child or other players during the game and practices unless I am one of the official coaches of the team.
- 17, I understand that there is a no smoking policy at Walsh Park League complex and will follow it.
- 18. I understand that no pets are allowed at Walsh Park unless service-dog must have shirt on.

Print Father's Name:	Father's Signature:	
Print Mothers Name:	Mother's Signature:	
Print Parent Name:	Parent's Signature:	
Print Parent Name:	Parent's Signature:	
Players Name:	Player's Signature	
Team:		

WITH ALL SIGNATURES PLEASE TURN IN TO MANGER AT 1<sup>ST</sup> PRACTICE WITH MEDICAL RELEASE