2023 RECREATIONAL BASEBALL



Suburban: Grades 3-4 Senior: Grades 5-6

Registration: January 3-29 online, January 3-27 in office

(\$10 late fee starting January 30th, \$20 late fee starting February 13th) Wilbraham residents or school choice only

NAME:	D.O.B	/	/	AGE:	GR:	M / F (Circle one)	
ADDRESS:				HOME PHONE:		. ,	
PARENT NAME:			CELL:				
PARENT NAME:			CELL:				
EMAIL ADDRESS #1	EMA	IL ADDI	RESS #2 _				
Coaches communicate primarily through email, please check yours daily *Parent is responsible for informing their coach(es) of any relevant allergy or restrictions* NOTE: There are no requests allowed IS THERE A SIBLING PLAYING IN THE SAME AGE DIVISION? YES / NO NAME:							
Suburban: (GRADES 5&6) <u>\$125</u> Wilb. Residents (-	0)				
 Senior: (GRADES 5&6) <u>\$150</u> Wilb. Residents (<u>REQUIRED</u>: PLEASE INDICATE BY CIRCLING THE FOLLO MOM / DAD /OTHER NAME: 	WING - WILL	A PAR	ENT <u>HE</u>			YES / NO	
List any special coaching experience:							

THE WPRD IS NOT ABLE TO ACCOMMODATE REQUESTS FOR TEAMS OR PRACTICE/GAME TIMES

PLEASE READ THE FOLLOWING CAREFULLY:

WAIVER: I, the undersigned parent a	Ind/or guardian of	, a minor, on th	e date of	, do hereby consent to my child's			
participation in voluntary recreation	al programs of the Town of Wilbraham.	I agree not to sue and also agree	e to forever release th	ie Town of Wilbraham, and the H.W.			
School District their servants, officer	rs, officials, employees, agents and ("the	releasees") assisting or participa	ating in voluntary recr	reational programs of the Town of			
Wilbraham from any and all claims, r	rights of action and causes of action that	may arise in the past, or may ar	ise in the future, dire	ctly or indirectly, from personal injuries to			
my child or property damage resultir	ng from my child's participation in the To	own of Wilbraham voluntary reci	eational programs.				
I also promise, to indemnify, defend,	, and hold harmless the releasees agains	t any and all legal claims and pro	ceedings of any descr	ription that may have been asserted in			
the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to my child or property damage resulting from my child's participation in the							
Town of Wilbraham voluntary recreational programs. I further affirm that I have read this Consent and Release Form and that I understand the contents of this form. I							
understand that my child's participat	tion in these programs is voluntary and t	that my child and I are free to ch	oose not to participat	te in said programs. By signing this form, I			
affirm that I have decided to allow m	ny child to participate in the Town of Will	braham's athletic recreational p	rograms with full kno [,]	wledge that the releasees will not be			
liable to anyone for personal injuries and property damage my child or I may suffer in voluntary Town of Wilbraham recreational programs.							
 RELEASE: For promotional purpose responsibility to notify the WPRD i LATE FEES: Late fees are implement order to get the program running Parent is responsible for informinal 	a program is based on the enrollment, in esphotos/videos may be taken of my chi in writing prior to the start of the season nted to encourage registration is done by on time. Ing coach (es) about relevant allergies/re and agree to all of the above	ild and put on the WPRD or othe a swell as coach and photograp y the designated date so our Dep estrictions*	r websites or in printe her if my child is not t	ed material. I understand it is my to be photographed.			
			DATE:				
SIGNATURE OF EITHER PARENT OF	GUARDIAN REQUIRED						
DATE:	TOTAL PAID:	CHECK #	CREDIT CARI	D			

Wilbraham Parks & Recreation Programs Adult Code of Conduct Contract

I hereby pledge to provide positive support, care and encouragement for my child and other children participating within this program by following this Code of Ethics to help establish a positive experience for all players, coaches, and families involved.

• I will encourage and demonstrate by example the importance of good sportsmanship and positive support for all players, coaches, and officials at practices and games.

- I will place the emotional and physical well-being of my child over my personal desire to win.
- I will assist in a drug, tobacco and alcohol-free environment.
- I will assist in teaching my child that rules are important and must be followed.

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

• I understand that verbal and physical abuse including profanity and foul language is not to be tolerated against anyone in this organization.

• I understand that racial epithets or negative innuendo related to a person/players race, religion or ethnicity will not be tolerated.

- I will respect all officials, coaches and volunteers.
- I will not approach a coach, before, during or after a game, and I will wait 24 hours before speaking with a coach.

• I will not create conflict by slander, malicious rumors or threats, nor will I entice others to do so either verbally or through social media

****IMPORTANT NOTICE****

I understand that both my son or daughter and I will be fully committed (attending practices and games) and supportive of the Wilbraham Program.

It is the expectation of this Commission that both parent and coach should always act in a manner exemplifying the very attributes that are instilled in the participants by various programs of the Wilbraham Parks & Recreation Department. We expect parents to treat others as you know they should be treated and as you wish them to treat you.

At no time should a parent or coach confront each other before, during or after a contest or practice. Furthermore any such contact in the presence of children will call for immediate sanction by the Commission.

Any concern(s) between parent and coach should follow the guidelines established by the agreement where:

- 1. Concerns are brought to the attention of the Director of the Wilbraham Parks and Recreation.
- 2. Parties will be allowed to speak with the Director.
- 3. Should the Director and Party(s) reach an impasse, this matter shall than be presented to the Commission.
- 4. Each Party shall be given an opportunity to present the matter before the Commission.
- 5. Once each Party has presented, the Commission shall within a specified time announce its decision

The Commission strongly discourages the use of any social media to broadcast thought and judgments which may bring hurt upon any/all involved. Broadcasting disparaging remarks and opinions (directly or indirectly) about a coach, parent or athlete is strongly discouraged by the Commission.

It is the hope that the execution of this document will discourage any/ all behavior which may be detrimental to the children and citizens of the Town of Wilbraham.

By signing below, I understand that if I violate any of these Codes of Ethics it will affect my/our participation in any activity for not less than the balance of the current season, or as determined by the Wilbraham Recreation Department and/or Commission.

Your signature constitutes acknowledgement by both spouses/guardians/step parents of agreement to abide by the rules and regulations stated above.

Signature:	
Print Name:	Date:
Player Name(s)	Grade:

WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate in Town of Wilbraham Parks & Recreation Department programs and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,

2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,

3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

4. In addition to general risks of participation, the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. Town of Wilbraham Parks & Recreation Department seeks to limit the spread of COVID-19 by requiring that participants stay home if they: 1) are sick, 2) are feeling any symptoms of COVID-19 as identified by the CDC (such as cough, shortness of breath or difficulty breathing, fever, chills, or new loss of taste or smell), 3) have a fever of 100°F or above, 4) are suspected of having COVID-19 or 5) had recent exposure to someone with a suspected or confirmed case of COVID-19. By signing below, I acknowledge that I will abide with these requirements to self-monitor and will take my temperature and my child(ren)'s temperature prior to participation. On behalf of myself and my family - we agree to adhere to all state, local, and other guidelines in place designed to keep people safe. I understand that Town of Wilbraham Parks & Recreation Department is not monitoring whether I or other participants comply with this requirement.

5. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Town of Wilbraham, Town of Wilbraham Parks & Recreation Department, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of participant:

Participant signature:_____Date signed: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward or release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of parent/guardian: _____

Parent guardian/signature:_____Date signed: _____