

**Covington Youth Sports Association, Inc.**

# **Baseball & Softball SIGN-UPS**

**MONDAY • January 22 (6 - 8pm)**

**MONDAY • February 5 (6 - 8pm)**

**WEDNESDAY • February 14 (6 - 8pm)**

**SATURDAY • February 17 (11am - 1pm)**

**WEDNESDAY • February 21 (6-8pm)**

**LOCATION: COVINGTON EAGLES**

**\*\*enter through the EAST SIDE entrance\*\***

## **REGISTRATION FEES**

**T-Ball: \$55**

**1 Child: \$80**

**2 Children (per family): \$130**

**3 Or More Children (per family): \$160**

**7th & 8th Grade Boys Baseball**

**March-May - \$150**

**\*\*POSSIBLE SECOND SEASON\*\***

**DETAILS TO COME AT LATER DATE**

**DIVISION AGES (as of January 1, 2024)**

**6U COED : 5-6 Years**

**8U BOYS / 8U GIRLS : 7-8 Years**

**10U BOYS / 10U GIRLS : 9-10 Years**

**12U BOYS : 11-12 Years (or in 6th grade, but NOT 14)**

**12U GIRLS FASTPITCH: 11-12 Years**

- No Coach or Team requests will be accepted.
- Parent or guardian must accompany all registrants.
- Additional \$10 will be added to all not registered during the above designated times.
- If interested in coaching, requests may be done at the time of registration. Please ask board members for sign-up sheet.
- Please email [covingtonyouthsports@gmail.com](mailto:covingtonyouthsports@gmail.com) with any questions.

**NO LATE REGISTRATIONS ACCEPTED AFTER MARCH 1**

# Covington Youth Sports Association Baseball/Softball Registration Card

Name of Player \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Birth Date \_\_\_\_\_ Age (on January 1<sup>st</sup>) \_\_\_\_\_

Grade (now) \_\_\_\_\_

**Gender (Circle):** MALE or FEMALE

**Shirt Size (Circle one):** Youth or Adult  
(Circle one): Small Medium Large XL 2XL

**Hat (adjustable) (Circle one):** Youth or Adult

(Circle one) We Do **OR** We Do Not

Have insurance to cover the above during the summer baseball/softball season in case of an injury. If insurance is carried I then relieve the Covington Youth Baseball Association from all responsibility in case of an injury. I hereby authorize the above to play ball in a league according to age or grade eligibility date. I also relieve the manager or coach and drivers of cars in transporting the above to and from games of all responsibility in case of an accident.

Due to the increase on requests to have or not to have a particular coach or team, we will no longer be accepting such request.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

-----  
(BELOW IS TO BE COMPLETED BY A BOARD MEMBER)

DIVISION \_\_\_\_\_

**THE FOLLOWING MUST BE SIGNED BY PARENT OR GUARIDAN**

We hereby agree that the Covington Youth Sports Association it's members, coaches, or officers, shall not be liable for any injury or loss which my child or children may sustain while participating in the activities of any kind. Whether sponsored by or under the supervision of the Covington Youth Sports Association, Stillwater Recreation League, it's members, officers, or designator of any kind, from any claim whatsoever.

**Print** Name of Parents or Guardian \_\_\_\_\_  
\_\_\_\_\_

**Signature** of Parent or Guardian \_\_\_\_\_ **Date** \_\_\_\_\_

**EMERGENCY MEDICAL AUTHORIZATION**

Player(s) Name \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_  
Other Phone \_\_\_\_\_

Purpose: To enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured while playing in the Stillwater Summer Recreation League when parents or guardians cannot be reached.

**PART 1 OR 2 MUST BE COMPLETED**

**PART (1) – TO GRANT CONSENT**

In the event reasonable attempts to contact me at \_\_\_\_\_ (phone #) or other parent or guardian at \_\_\_\_\_ (phone #) have been unsuccessful. I hereby give my consent for : (1) the administration of any treatment deemed necessary by \_\_\_\_\_ (Physician) or \_\_\_\_\_ (Dentist), or in the event the designated practitioner is not available, by another licensed physician or dentist: and (2) the transfer of the child to \_\_\_\_\_ (Hospital), Or any other hospital reasonably accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

Facts concerning the child's medical history including **allergies, medications** being taken and any **physical impairments** to which a physician should be alerted: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PART (2) REFUSAL TO CONSENT**

(Do not complete part (2) if you completed part (1))

I do not give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the coach in charge to take no action or to: \_\_\_\_\_  
\_\_\_\_\_



## Code of Conduct

In an effort to promote good sportsmanship, The Covington Youth Sports Association, Inc. (and all of its Participants, Coaches, and Spectators) has pledged to enforce a code of conduct that we hope will ensure the physical and emotional well-being of all its participants. Our goal is to ensure that all of our participants will thrive in an environment where respect, team play, and camaraderie abound. The Covington Youth Sports Association recognizes the physical and aggressive nature of the sport and, as such, we recognize the need for control. As parents and coaches, it is our responsibility to lead by example. Therefore, all parents and coaches are responsible to read and sign this Code of Conduct and to adhere by it. All participants who are deemed to be in violation of the Code of Conduct are subject to removal from the Covington Youth Sports Association without warning and/or refund. Parents who are found to be in violation may be barred from attending games/contest and/or forfeit their child's right to participate in the Covington Youth Sports Association. Such offenses that may warrant suspension or expulsion are as follows:

- 1.) Abuse of a game official, coach, league officer, player, or spectator, whether it is verbal or physical, including but not limited to swearing, violence, obscene gestures, and other aggressive/inappropriate behavior reported to the Covington Youth Sports Association Board.
- 2.) Gross misconduct, including but not limited to fighting with an opposing player on or about the playing fields.
- 3.) Intentional acts that could result in bodily injury or emotional harm to any person on or about the playing fields.

Coaches are to place the emotional and physical well-being of his players ahead of his desire to win. Coaches will lead by example in demonstrating fair play and sportsmanship to his players. Swearing and excess physical contact will not be tolerated and could result in immediate removal from Covington Youth Sports Association. Parents and other spectators are expected to express their enthusiasm positively during games. Any negative expressions (booing, jeering, etc.) will be considered in violation of this code. The Covington Youth Sports Association hopes to enhance the development of its participants. Our goals are to benefit the children who choose to participate. The above guidelines are set as a reminder that as parents and coaches we are to act as positive examples for our children to follow. It is mutually agreed that any/all determination of Code of Conduct by Covington Youth Sports Association Board will be final and without question.

## Waiver & Release by Parent of Minor Participant from Liability:

The undersigned Parent(s) and/or Legal Guardian(s) of a minor child, listed below (hereinafter referred to as "PARTICIPANT") HEREBY WAIVE AND RELEASE, indemnify, hold harmless and forever discharge: COVINGTON YOUTH SPORTS ASSOCIATION, INC., and its agents, volunteers, officers, directors, affiliates, successors and assigns of and from any/all claims, demands, debts, contracts, expenses, causes of action, lawsuits, damages, and liabilities of every kind and nature; whether known or unknown, in law or equity that I or PARTICIPANT ever had or may have arising from or in any way related to PARTICIPANT'S participation in any of the events and/or activities conducted by Covington Youth Sports Association, Inc.

I understand that the activities that said PARTICIPANT will compete in are inherently dangerous and may cause serious or grievous injuries; including bodily injury, damage to personal property and/or death. On behalf of myself, PARTICIPANT, my heirs, assigns, and next of kin; I and said PARTICIPANT may have against the aforementioned released party to such activity. PARTICIPANT has the necessary and requisite skills to participate in all facets of, and activities of said event. The nature of the activities has been fully disclosed and any filter, advertisement, or brochure relating to the participating activities is expressly made part of this WAIVER AND RELEASE.

By this Waiver, I, on behalf of said PARTICIPANT, assume any/all risk and take full responsibility and waive any/all claims of personal injury, death or damage to personal property associated with Covington Youth Sports Association, Inc.; including but not limited to training at any facility, using the facility/field/stadium and its' equipment, practicing and/or engaging in any/all drills, exercises, leagues, and/or activities and events or other related activities on and off the premises. This WAIVER AND RELEASE contains the entire agreement between the parties, and supersedes any prior written or oral agreement between them concerning the subject matter of this WAIVER AND RELEASE. The provisions of this WAIVER AND RELEASE may be waived, altered, amended, or repealed, in whole or in part, only upon the prior written consent of all parties. The provisions of this WAIVER AND RELEASE will continue in full force and effect even after the termination of the activities conducted by, on the premises of, or for the benefit of Covington Youth Sports Association, Inc. whether by agreement, by operation of law or otherwise.

I have read, understand, and fully agree to the terms of both this WAIVER AND RELEASE and CODE OF CONDUCT. I understand and confirm that by signing the WAIVER AND RELEASE and CODE OF CONDUCT said PARTICIPANT and I have given up considerable future legal rights. I have signed this Agreement freely, voluntarily, under no duress and/or threat of duress, without inducement, promise and/or guarantee being communicated to me. My signature is proof of my intention to execute a complete and unconditional WAIVER AND RELEASE of all liabilities to the full extent of the law.

**PARTICIPANT**

**PARENT (and/or Legal Guardian)**

**COACH's Name**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Printed Name**

**Printed Name**

**Printed Name**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Signature and Date**

**Signature and Date**

**Signature and Date**

**COVINGTON YOUTH SPORTS ASSOCIATION, Inc.**