

2015 Tri-Town Youth Baseball / Softball Registration



To register:

- 1) Complete the attached registration form, one per child.
- 2) First year participants must include a copy of the player's birth certificate.
- 3) Make a check or money order for \$20 per child payable to TTYC.
- 4) **Return in a sealed envelope on or before March 6th.**
 - a. **Registration Day, March 6th, Outside ECS Cafeteria(5:30-7pm)**
 - b. **Return to your child's teacher with TTYC Youth Baseball marked on the front of the envelope.**

For the safety of all youth involved the following age guidelines will be in place. Please note, inexperienced players may be evaluated by the coaches to determine if they are better suited for a lower level of play. Parents may also request that their child be left in a lower level of play if they feel that they need additional time to develop the skills to become more successful. If you have any questions on eligibility you may contact Jason Ough.

Age requirements are as follows:

- Tee Ball: Birth date falls between May 1st, 2008 - April 30th, 2010
- Pee Wee: Birth date must fall between May 1st, 2006 & April 30th, 2008.
- Minors Baseball: Birth date must fall between May 1st, 2004 & April 30th, 2006.
- Minors Softball: Birth date falls between May 1st, 2004 - April 30th, 2006.
- Majors Baseball: Birth date must fall between May 1st, 2002 & April 30th, 2004.
- Majors Softball: Birth date falls between May 1st, 2002 – April 30th, 2004

Tentative Calendar of Events:

- March 6th– Registrations Due
- April 5th – 11th – Coaches should contact each player by the end of the week beginning April 5th. If you are not contacted by April 11th, please feel free to contact Jason Ough. Some teams may begin practice in early April depending on field conditions.

**Please direct questions to
Jason Ough at
(607) 287-7459**

Tri-Town Youth Baseball/Softball

The Tri-Town Youth baseball program works in cooperation with other areas schools to develop a safe, effective and quality oriented youth baseball/softball program. This group includes representatives from Gilbertsville-Mount Upton, Morris, Laurens, and Unadilla Valley. As a local league the following definitions of each level of play have been adopted.

- **T-ball** – This program is designed to allow children the opportunity to begin to understand the mechanics of the sport of baseball while enjoying physical activity and social interaction. At this level the child will hit off of a T or be pitched to by their coach. Each player will be given the opportunity to bat during each inning, there will be no outs and players are encouraged to attempt to field the ball. No score will be kept at this level.
- **Pee-Wee** – This program is similar in design to t-ball as coaches continue to work to help youth develop the mechanics necessary to be successful and begin to learn the rules of the game. This level will be coach pitched and the rules of traditional baseball are modified to help make each player successful. A five run limit is in place to help keep games close in score.
- **Minors** – This program works on the development of a true understanding of the game. Youth now work at learning each of the positions on the field and follow most of the rules of the game. Youth have the choice of minor level Little League or minor level Softball.
- **Majors** – This program is a more competitive level of competition as youth refine their skills before moving on to the modified (junior high) or Pony League level of play. Youth have the choice of either Little League or Softball.

Under certain circumstances a child may be moved up a level early or be kept down a level for an extra period of time. If you feel it would be in the best interest of your child to be moved up or kept down a playing level please note this on the back of the registration form. Each case will be looked at on an individual basis and examined by coaches and the current baseball commissioner. It is the goal of the program to provide all youth with a safe and appropriate level of play for their ability.

Practice and Game Schedules:

Practices will be held on both the Edmeston and West Edmeston ball fields as well as on the grassy area behind the town barn in Edmeston. Due to the nature of scheduling for up to twelve Tri-Town teams in combination with multiple teams from other townships we cannot guarantee that Youth Baseball will not conflict with the Spring Soccer Program. Game schedules will be posted on the Tri-Town Website: <http://fuzzygraphics.com/tritown/>

Tee-Ball – Generally Saturdays between 9 AM and 1 PM. Some travel maybe required.

Pee-Wee – Generally two times per week and may include Saturdays. Travel to area schools will be required. School night games will begin at 6 PM, with no inning started past 8 PM.

Minors & Majors – Generally two times per week and may include Saturdays. Travel to area schools will be required. School night games will begin at 6 PM, with no inning started past 8 PM.

Tri-Town Youth Baseball/Softball Registration Form

Player Information

Name: _____ Age: _____ Date of Birth: _____

Gender: M / F Shirt Size: Youth - S – M – L or XL / Adult – S – M – L or XL

Pant Size (Minors & Majors) Youth – M – L or XL / Adult – M – L or XL

Parent's Name: _____ Phone: _____

Address: _____ E-mail: _____

Name and ages of other family members in youth baseball: _____

Parent Contract

One of the goals of the Tri-Town Youth Baseball/Softball is to make the baseball/softball experience a positive one for the participants, parents, coaches and those who choose to watch our youth perform. To achieve this goal, we must all work together and support each other.

In an effort to facilitate this, we ask that each parent or guardian read the following guidelines regarding their role. By signing this contract you are demonstrating your support of the sportsmanship initiatives being undertaken by this league.

- As a parent I recognize that it is vital that I support the efforts and decisions of the coaching staff of my child. In the event I have questions regarding my child's role, I will communicate those concerns to the coach in a respectful and timely fashion (not during or immediately after a game when emotions may be high).
- As a parent I also recognize the importance of being a positive role model. Therefore, I agree to conduct myself in a manner consistent with good sportsmanship at all contests, both at our home sites as well as at away sites. I agree to cheer in a positive fashion for outstanding play and will refrain from criticizing the efforts of the officials, players and coaches.
- Attendance at practice is a priority for all team members. As a parent/guardian of a team member I will make every attempt to assure that my child and a representative of my family will be able to attend all practices and contests.
- I will help facilitate the continuation of the program through my support in assisting at practices and games in the snack shack, on the bench and/or on the field.

DISCLAIMER:

I/We, the parents of the above named candidate for a position in the Tri-Town Youth Baseball/Softball League hereby give my/our approval to participate in any and all league activities. I/We assume all risks, hazards and incidental to such participation including transportation to and from activities; and I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the local league, Tri-Town Youth Baseball/Softball, Town of Edmeston, Town of West Edmeston, the Edmeston Fire District, the West Edmeston Fire District, the organizers, sponsors, supervisors, participants and persons transporting my/our child to and from activities, from any claim or liability of any kind arising out of injury to my/our child, whether the result of negligence or for any other cause, except to the extent and in the amount covers by accident or liability insurance. I/We agree to return upon request the uniform and other equipment issued to my/our child in as good a condition as when received (except for normal wear and tear). I/We will furnish a certified birth certificate of the above named candidate to League Officials.

Parent / Guardian Signature: _____

Date: _____

I can assist the Youth Baseball Program by: ____ Coaching ____ Asst. Coaching
____ Asst. @ Practice ____ Umpiring ____ Other ____ Asst. Cook Shack Coordination

Tri-Town Youth Baseball/Softball Health Form

Please return this portion with your registration form.

This will enable us to help make sure your child has a safe season.

PART A: TO BE COMPLETED BY PARENT/GUARDIAN

Participant: _____ **Date of Birth:** _____

Age: _____

Limitations _____ **yes** _____ **no**

PART B: TO BE COMPLETED BY PARENT/GUARDIAN

If the answer to any of the following questions is "YES, please describe, on the line provided, the condition or situation that prompted your answer.

THIS FORM WILL BE GIVEN TO THE COACH OF PLAYER LISTED

1. Any injuries requiring medical attention during the past year? _____ **yes** _____ **no**

 2. Taking medicine or under physician's care at this time? _____ **yes** _____ **no**

 3. Any feeling of faintness, dizziness, or fatigue after exercise or exertion? _____ **yes** _____ **no**

 4. Any surgical operations or fractures in the past year _____ **yes** _____ **no**

 5. Any treatment in a hospital or emergency room in the past year _____ **yes** _____ **no**

 6. Any allergies or reactions? _____ **yes** _____ **no**

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PART C: PARENTAL PERMISSION

I, the undersigned, clearly understand these questions and the person herein described has permission to engage in all prescribed activities, except as noted by me. In the event of an emergency where I cannot be reached, I hereby give permission to the physician selected by the team coach and/or emergency medical providers to secure appropriate medical treatment. The answers are correct as of this date and he/she has my permission to participate.

Signed: _____ Date: _____

Phone numbers where parents/guardians can be reached:

Name: _____ Work Phone (_____) _____ Cell Phone (_____) _____

Name: _____ Work Phone (_____) _____ Cell Phone (_____) _____

Emergency contact (OTHER THAN PARENT): _____ Phone (_____) _____

Relationship to athlete _____

Emergency contact (OTHER THAN PARENT): _____ Phone (_____) _____

Relationship to athlete _____

Other Important Medical Information Not Previously Mentioned: _____
