



# PALMETTO LITTLE LEAGUE FALL 2020 REGISTRATION



Registration Opens – Sept. 1st

Registration Ends – Sept. 10th

Practices Start – ASAP

Opening Day – TBT

\*This Fall Training Season we will be sharing our space and playing with Manatee West Little League while their fields are being reconstructed.

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



### Registration Checklist

- \_\_\_\_\_ Discounts Offered
- \_\_\_\_\_ Registration Form
- \_\_\_\_\_ Volunteer Form
- \_\_\_\_\_ Little League Volunteer Application
- \_\_\_\_\_ Parent Involvement
- \_\_\_\_\_ Medical Release Form
- \_\_\_\_\_ Parent Code of Conduct
- \_\_\_\_\_ Covid-19 Procedure Acknowledgement

### Registration REQUIRED Documents:

- \_\_\_\_\_ Copy of Birth Certificate
- \_\_\_\_\_ School Form or
- \_\_\_\_\_ Proof of Residency (1 from each group below with current and same address, which means 3 additional documents to the birth certificate, per Little League rules)

GROUP ONE	GROUP TWO	GROUP THREE
1. Driver's License	1. Welfare/child care records	1. Voter's Registration
2. School records	2. Federal records (Federal Tax, Social Security, etc.)	2. Utility bills (i.e., gas, electric, water/ sewer, phone, mobile phone, heating, waste disposal)
3. Vehicle records (i.e., registration, lease, etc.)	3. State records	3. Financial records (i.e. loan, credit, investments, etc.)
4. Employment records	4. Local (municipal) records	4. Medical records
5. Insurance documents	5. Support payment records	5. Internet, cable, or satellite records
	6. Homeowner or tenant records	
	7. Military records	

### Experience Level (number of seasons)

T-ball \_\_\_\_ Pitching Machine \_\_\_\_ Minors/Majors \_\_\_\_  
 Intermediate \_\_\_\_ Juniors \_\_\_\_ Seniors \_\_\_\_

Baseball and Softball Divisions: T-ball (\$80) \* Pitching Machine (\$100) \* Minors (\$125)  
 Majors/Inter (\$140) \* Jr/Sr (\$165)

Late Fee's after registration closing date may be applied.

### For League Use Only:

Registration Fee Due \$ \_\_\_\_\_ \$ \_\_\_\_\_ (Discounts) \$ \_\_\_\_\_ (Deposit)  
 Form of Payment \_\_\_\_\_  
 By \_\_\_\_\_ (Board Member Name)  
 Date \_\_\_\_\_

# DISCOUNTS OFFERED



\$10 for Military \_\_\_\_\_ (ID #)

*(with proof of military identification)*

\$10 for each additional child registered for PLL

Player Name

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Sibling Name (s)

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Parent Name

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Comments:

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**2020 Fall Season**

**Baseball**

**Softball**

**Date** \_\_\_\_\_

**Player Name:**

Last	First
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Address		
City	State	Zip
Primary Phone:	D.O.B.:	
Email Address:		
Gender: Male _____ Female _____		
Division: T-ball _____ Pitching Machine _____ Minors _____ Majors _____ Jr/Sr _____		

**Parent / Guardian #1 Name:**

Last	First
Relationship to Player:	Occupation:
Email Address:	Volunteer: Yes _____ No _____
Home Phone: _____ Work: _____ Cell: _____	

**Parent / Guardian #2 Name:**

Last	First
Relationship to Player:	Occupation:
Email Address:	Volunteer: Yes _____ No _____
Home Phone: _____ Work: _____ Cell: _____	

School:	Grade:
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**Uniforms**

Shirt Size: (Circle One) Uniforms are custom ordered as noted on this form, therefore returns/exchanges will not be available. Please make sure of your child's size. Please contact a board member for additional jersey orders including family options.

YOUTH: XSmall Small Medium Large  
 ADULT: Small Medium Large XL XXL XXXL

Hat: Youth Adult Uniform # Preferences \_\_\_\_\_

**Emergency Contact (other than guardians) Name** \_\_\_\_\_ **PH** \_\_\_\_\_

(Circle One)

**Player lives with:** BOTH GUARDIAN #1 GUARDIAN #2 OTHER \_\_\_\_\_



Welcome to the **Fall Training 2020 Palmetto Little League Baseball Season**. Thank you so much for your interest and consideration. We are honored to have the opportunity to work with your family and players this Fall. The Board at Palmetto Little League is excited to get back to work and pick up on the momentum from Spring that was cut so tragically short by the Covid-19 pandemic.

A few things are carrying over from Spring 2020. If you were signed up for Spring Ball with Palmetto Little League and were unable to return for the Summer session, we are offering 50% off the sign-up cost for Fall 2020. If you were able to return for Summer, we are offering \$10 off the cost of Fall Ball. Thank you so much for your continued support.

In returning for Fall 2020 baseball, we're continuing to require that all of the Covid-19 precautions required or advised by national, state and local authorities remain in place as well as that the guidelines published on our website, [palmettolittleleague.org](http://palmettolittleleague.org), are understood and followed.

Please visit our website or our Facebook page and review those guidelines before signing this form. We must be able to rely on the support of all our families to help the board provide the safest, healthiest possible experience.

Thank you again for your support, and we can't wait to see everyone at Blackstone!

### **The Palmetto Little League Board**

I hereby acknowledge that I have reviewed and understand the Covid-19 requirements as laid out on the Palmetto Little League website as well as all local, state and national agencies:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

# VOLUNTEER FORM



Parent Name

Player Name

Division

Phone Number

Alternate Phone Number

Email

Concession

Team Parent

Field Maintenance

Lining of Fields



## Parent Involvement

Our League depends on our families and volunteers to keep it running efficiently and in the best interest of the players. We want to have a clear understanding of the league expectations for volunteering.

### **All Parents and Guardians:**

For every night that your child's team is listed as the HOME team on their game schedule, your team must provide a volunteer to help in the concession stand. This is normally split evenly between representatives of two different players each game. The game balls will not be given until a volunteer has arrived in the concessions stand. Teams will organize signup sheets to best fit everyone's availability.

Other volunteer opportunities include field preparation, team parenting, coaching and managing as well as board involvement and help with special events.

It's expected that each family volunteer at least two times per player and on two separate dates. This is most commonly done in the concession stand; however, if you're interested in helping in a different way, we encourage you to speak with a board member. Logs for volunteering are kept in the concession stand.

We understand that it's not possible for every family to volunteer for a variety of reasons. We encourage you to speak with a board member if that's the case to discuss other options.

Thank you for your support.

Parent/ Guardian Initials \_\_\_\_\_

### **Volunteers:**

**I am interested in volunteering as:**

**SHIRT SIZE \_\_\_\_\_**

\_\_\_\_\_ Team Parent (helps organize volunteers from our team, i.e., concessions stand, snack lists, etc.)

\_\_\_\_\_ Coach (assist the manager in the field/dugout at practices and games)

\_\_\_\_\_ Manager (responsible for team's equipment, organizing and holding structured practices and providing instruction to assist coaches and players)

**\*All Volunteers must fill out a Volunteer Application (Separate) each season\***



# Little League® Baseball and Softball MEDICAL RELEASE



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

Player: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender (M/F): \_\_\_\_\_

Parent (s)/Guardian Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Parent (s)/Guardian Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Player's Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Country: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

**PARENT OR LEGAL GUARDIAN AUTHORIZATION:** Email: \_\_\_\_\_

In case of emergency, if family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel. (i.e. EMT, First Responder, E.R. Physician)

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Country: \_\_\_\_\_

Hospital Preference: \_\_\_\_\_

Parent Insurance Co: \_\_\_\_\_ Policy No.: \_\_\_\_\_ Group ID#: \_\_\_\_\_

League Insurance Co: \_\_\_\_\_ Policy No.: \_\_\_\_\_ League/Group ID#: \_\_\_\_\_

**If parent(s)/legal guardian cannot be reached in case of emergency, contact:**

Name	Phone	Relationship to Player

Name	Phone	Relationship to Player

Please list any allergies/medical problems, including those requiring maintenance medication. (i.e. Diabetic, Asthma, Seizure Disorder)

Medical Diagnosis	Medication	Dosage	Frequency of Dosage

Date of last Tetanus Toxoid Booster: \_\_\_\_\_

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.

Mr./Mrs./Ms. \_\_\_\_\_  
Authorized Parent/Guardian Signature Date: \_\_\_\_\_

**FOR LEAGUE USE ONLY:**

League Name: \_\_\_\_\_ League ID: \_\_\_\_\_

Division: \_\_\_\_\_ Team: \_\_\_\_\_ Date: \_\_\_\_\_



# Sport Parent Code of Conduct

We, the \_\_\_\_\_ Little League, have implemented the following Sport Parent Code of Conduct for the important message it holds about the proper role of parents in supporting their child in sports. Parents should read, understand and sign this form prior to their children participating in our league.

Any parent guilty of improper conduct at any game or practice will be asked to leave the sports facility and be suspended from the following game. Repeat violations may cause a multiple game suspension, or the season forfeiture of the privilege of attending all games.

## *Preamble*

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 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 youth, not 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 policies 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 by demonstrating positive support for all players, coaches, officials and spectators at every game, practice or other sporting event.
6. I (and my guests) will not engage in any kind of unsportsmanlike conduct with any official, coach, player, or parent such as booing and taunting; refusing to shake 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 a winner every time.
12. I will never ridicule or yell at my child or other participants for making a mistake or losing a competition.
13. I will emphasize skill development and practices and how they benefit my child over winning. I will also de-emphasize games and competition in the lower age groups.
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 games and will never question, discuss, or confront coaches at the game field, and will take time to speak with coaches at an agreed upon time and place.
16. I will demand a sports environment for my child that is free from drugs, tobacco, and alcohol and I will refrain from their use at all sports events.
17. I will refrain from coaching my child or other players during games and practices, unless I am one of the official coaches of the team.

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Parent/Guardian Signature