



FRENCHTOWN CHARTER TOWNSHIP YOUTH BASEBALL/SOFTBALL PLAYER CONTRACT REGISTRATION

Please Circle One "AGE GROUP" and One "SHIRT SIZE" per Registration

SHIRT SIZES: (Youth - small/medium/large/x-large)
(Adult - small/medium/large/x-large/xx-large)

AGE GROUP

5-6	T-Ball	(age as of April 30 th this year)	(Co-Ed)
7-8	Transition	(age as of April 30 th this year)	(Co-Ed)
9-10	Midget Minor Baseball	(age as of April 30 th this year)	(Boys)
11-12	Midget Major Baseball	(age as of April 30 th this year)	(Boys)
13-15	Junior Travel Baseball	(age as of April 30 th this year)	(Boys)
9-10	Minor Softball Slow Pitch SB	(age as of Dec. 31 st of previous year)	(Girls)
11-12	Major Traveling Fast Pitch SB	(age as of Dec. 31 st of previous year)	(Girls)

LEAGUES START THE 2nd WEEK OF JUNE
FAIR TEAMS ARE AGES 11-12 AS OF APRIL 30, 2018. DATES FOR TRY OUTS WILL BE ANNOUNCED.
TEAM SELECTION AND DRAFT WILL BE April 19, 2018

PLEASE PRINT:

Player Name: _____
(First) (M) (Last)

Address: _____
(Street) (City) (State)

Phone No. _____ Date of Birth _____ Sex _____ Age _____

Grade in School _____ Township you live in _____

I agree to play for Frenchtown Township Recreation Department and abide by all rules and regulations and request that this registration form be accepted. In consideration of myself/my child being permitted to play for said team, my/my child's heirs, executors, administrators and assigns, waive and release any and all rights and claims for damages and losses myself/my child may have against Frenchtown Charter Township, the MHSAA, the Michigan/Frenchtown Township Recreation Association/Department and or member units, their respective agents, representatives, successors and assigns for any and all injuries suffered by myself/my child during the length of this contract.

Signed: _____
(parent/guardian - if player is under 18) (print name)

If you are interested in coaching, please print your name and phone number below:

_____ () _____

Fee is \$15 per Player. NO REFUNDS unless league is cancelled.

**SIGN UP FOR YOUTH BALL STARTS ON MARCH 5, 2018 AT THE TOWNSHIP HALL
OR MAIL REGISTRATION & FEE(S) TO: Frenchtown Charter Township Treasurer's Office
2744 Vivian Road
Monroe, Michigan 48162**

PLEASE MAKE CHECKS PAYABLE TO: FRENCHTOWN CHARTER TOWNSHIP TREASURER

FOR INFORMATION CALL THE RECREATION DIRECTOR AT 734-731-5102 or PHIL COYLE AT 734-430-2827

THE DEADLINE TO SIGN UP IS APRIL 13th 2018

**Please see reverse side for concussion information, which requires signatures. If printing this form from our website, please be sure to print the Concussion Information form, sign & submit it with your registration.*

CONCUSSION DANGER SIGNS

In rare cases, a dangerous blood clot may form on the brain in a person with a concussion and crowd the brain against the skull. An athlete should receive immediate medical attention if after a bump, blow, or jolt to the head or body s/he exhibits any of the following danger signs:

- One pupil larger than the other
- Is drowsy or cannot be awakened
- A headache that not only does not diminish, but gets worse
- Weakness, numbness, or decreased coordination
- Repeated vomiting or nausea
- Slurred speech
- Convulsions or seizures
- Cannot recognize people or places
- Becomes increasingly confused, restless, or agitated
- Has unusual behavior
- Loses consciousness (even a brief loss of consciousness should be taken seriously)

WHY SHOULD AN ATHLETE REPORT THEIR SYMPTOMS?

If an athlete has a concussion, his/her brain needs time to heal. While an athlete's brain is still healing, s/he is much more likely to have another concussion. Repeat concussions can increase the time it takes to recover. In rare cases, repeat concussions in young athletes can result in brain swelling or permanent damage to their brain. They can even be fatal.

WHAT SHOULD YOU DO IF YOU THINK YOUR ATHLETE HAS A CONCUSSION?

If you suspect that an athlete has a concussion, remove the athlete from play and seek medical attention. Do not try to judge the severity of the injury yourself. Keep

the athlete out of play the day of the injury and until a health care professional, experienced in evaluating for concussion, says s/he is symptom-free and it's OK to return to play.

Rest is key to helping an athlete recover from a concussion. Exercising or activities that involve a lot of concentration, such as studying, working on the computer, or playing video games, may cause concussion symptoms to reappear or get worse. After a concussion, returning to sports and school is a gradual process that should be carefully managed and monitored by a health care professional.

Remember

Concussions affect people differently. While most athletes with a concussion recover quickly and fully, some will have symptoms that last for days, or even weeks. A more serious concussion can last for months or longer.

It's better to miss one game than the whole season. For more information on concussions, visit:

www.cdc.gov/Concussion.

Student-Athlete Name Printed

Student-Athlete Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date