



# SALISBURY YOUTH ASSOCIATION WRESTLING REGISTRATION for 2017 – 2018

**Fee: \$75**

**(\$50 Participation deposit; \$50 Uniform deposit; mandatory fundraiser <80\$ buyout>)**

WRESTLER'S NAME: \_\_\_\_\_ D.O.B: \_\_\_/\_\_\_/\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE 1: \_\_\_\_\_ E-MAIL 1: \_\_\_\_\_

CELL PHONE 2: \_\_\_\_\_ E-MAIL 2: \_\_\_\_\_

PARENT(S) / GUARDIAN(S) NAME: \_\_\_\_\_

SCHOOL DISTRICT: \_\_\_\_\_ GRADE: \_\_\_\_\_ (NO INFORMATION WILL BE GIVEN OUT)

T-SHIRT SIZE (CIRCLE ONE): YSM YM YL YXL ASM AM

SWEAT-SHIRT SIZE (CIRCLE ONE): YSM YM YL YXL ASM AM

I/We the parents/guardians of the above child hereby give my/our approval to their participation in any and all activities of the Salisbury Youth Association during the current season relative to the wrestling program. In doing so, I/we assume all risks and hazards incidental to such participation including transportation to and from such activities, and hereby waive, release absolve indemnify and agree to hold harmless the Salisbury Youth Association, it's directors and staff, organizers, supervisors, sponsors and other participants and persons transporting my/our child/children to and from such activities, for any claim arising from injury to my child/children except to the extent covered by accident and/or liability insurance provided. I/We will assume full responsibility for the expense which may be incurred as result of accidental bodily injury occurred through participation in any and all activities of the Salisbury Youth Association.

INSURANCE NAME: \_\_\_\_\_ GROUP NUMBER: \_\_\_\_\_

IF YOU DO NOT HAVE INSURANCE, PLEASE SIGN YOUR NAME SHOWING THAT YOU UNDERSTAND THAT YOU ARE RESPONSIBLE FOR ALL EXPENSES. **X** \_\_\_\_\_

IN CASE OF INJURY OR AN EMERGENCY DO WE HAVE YOUR PERMISSION TO TAKE YOUR CHILD TO A DOCTOR OR HOSPITAL?

(CIRCLE ONE) **YES NO** If you circled "no," the parent / guardian must be present for the child to participate.

DOES YOUR CHILD HAVE ANY MEDICAL HISTORY OR ILLNESS THAT WE SHOULD KNOW OF?

(CIRCLE ONE) **YES NO** If you circled "yes," please disclose details: \_\_\_\_\_

**I HAVE READ ALL OF THE ABOVE AND FULLY UNDERSTAND AND AGREE.**

PARENT / GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**FOR SYA USE ONLY**

Registration Fee Received By: \_\_\_\_\_  Participation Deposit Received By: \_\_\_\_\_

Uniform Deposit Received By: \_\_\_\_\_  Fundraiser Received By: \_\_\_\_\_

## SALISBURY YOUTH ASSOCIATION PARENT/PLAYERS CODE OF CONDUCT

When you register your children to participate in one of our sports you automatically become a member of SYA. ALL members are obligated to fulfill a minimum of six hours volunteer service to the program for which you are registering.

HOME MATCH / TOURNAMENT PARTICIPATION – At uniform pickup, a \$50 deposit will be left for home match / tournament participation. *This deposit will not be cashed...initially.* You will be assigned a day and time that you must assist with the activities/tasks. Alternatively, a set of sign-up lists for various activities/tasks will be presented to parents early in the season... you will be expected to sign-up. Your \$50 deposit will be returned to you upon your completion of said activities/tasks. If you do not participate, your \$50 deposit will be forfeited.

All players are REQUIRED to participate in the mandatory fundraising efforts to help offset operating costs. Failure to participate in fundraising activities will result in your child not participating until the activities are fulfilled.

UNIFORM DEPOSIT – At uniform pickup, a \$50 deposit will be left as a deposit on the uniform. *This deposit will not be cashed...initially.* Failure to return the uniform by the designated return date, your \$50 deposit will be forfeited.

These conditions and rules are not intended to make things difficult, but to aid the SYA and the program director in seeing that everyone does his/her fair share so we can have a successful program and season. If payment of any check is refused, your child will not be allowed to participate until full cash payment is received. Thank you in advance for your understanding and cooperation.

**I HAVE READ ALL OF THE ABOVE AND FULLY UNDERSTAND AND AGREE.**

PARENT / GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE CHECK THE AREAS THAT YOU ARE INTERESTED IN HELPING WITH:

- Coach - Assist the Head Coach; assists with all pre- & post- season activities
- Practice Helper - Assist cleaning mats after practice... help maintain proper hygiene for our kids!
- Scorebook Keeper- Keep score book for the team for home and away matches
- Scoreboard / Clock Operator – Operate clock and scoreboard during home matches
- Statistician – Input Team and Individual match scores to league website
- Medical Helpers- Qualified medical personnel who are willing to help out in a first-aid situation (practice or games)
- Home match help- Assists with home match and tournament activities such as set-up / break down of wrestling mats, tables, chairs, set up for concessions sales, etc.
- Concessions – Help with concession sales during home matches and tournaments. Help donate items to be sold at the concession stand.
- Concessions – donate items to be sold at the concession stand.
- Admission collections – help collect admission fees and 50/50 raffle sales during home matches.
- End of year celebration / banquet- Helping to plan & run the end of the year awards ceremonies.

# SALISBURY YOUTH ASSOCIATION PARENT/PLAYERS CODE OF CONDUCT

The primary goal of the Salisbury Youth Association sports programs is to develop the essential elements of character-building and ethics in sports, and to encourage the concept of sportsmanship through the core principles of trustworthiness, respect, responsibility, fairness, caring, and good citizenship.

I therefore agree that:

1. I will not force my child to participate in sports.
2. I will remember that children participate to have fun, and the game is for youth, not adults. I will support the goals of youth sports that emphasize skill development, teamwork and fair play over winning.
3. I will place the physical and emotional well being of my child ahead of any personal desire to win.
4. I will inform the coach of any physical disability or ailment that may affect the safety of my child or the safety of others.
5. I will insist that my child play in a safe and healthy environment and I will not encourage behaviors or practices that would endanger the health and well being of the athletes.
6. I will insist a sports environment for my child that is free of drugs, tobacco, and alcohol. I will refrain from their use at all sports events.
7. I understand that the SYA youth sports programs are not a babysitting service. I will not leave my child, and or other children unattended at any event without prior approval from the coach. I will provide adequate supervision for other guests that I may bring to the event.
8. I will strive to learn the rules of the game and the policies of the league. I will support the official's enforcement of these rules and policies.
9. I (and my guests) will be a positive role model and encourage sportsmanship by showing respect and courtesy. I will demonstrate a positive support for all players, coaches, officials and spectators at every sports event.
10. I (and my guests) or my child, will not engage in any un-sportsmanlike conduct with any official, coach, other player, or parent, such as booing, taunting, refusing to shake hands, the use of profane language, or gestures.
11. Players should be taught to respect the dignity of the game. I will insist that my child treat other players, coaches, officials, and spectators with respect regardless of race, creed, color, sex or ability.
12. I will respect officials and their authority during games. I will never question, discuss, or confront coaches at the game field. I will calmly seek solutions at a proper time and location, refraining from confrontation in front of the children.
  - a. I understand that I have the right to submit a written complaint within seven days to the Association for any behavior by a coach, official, player, or spectator that I feel is inappropriate or non-supportive of the goals of the SYA.
13. I understand and agree that if I or any children under my guardianship fail to abide by the aforementioned rules and guidelines, I, or any child under my guardianship may be subject to disciplinary action that could include, but is not limited to the following, and not necessarily in the order listed.
  - a. Verbal warning by official, head coach, director, and or head of league organization.
  - b. Written warning from the director or president of the SYA.
  - c. Parental game suspension with written documentation of the incident kept on file by the SYA.
  - d. Game forfeit through the official or coach
  - e. Parental season suspension.

**I HAVE READ ALL OF THE ABOVE AND FULLY UNDERSTAND AND AGREE.**

PARENT / GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_