



**Coaches are expected to:**

1. Strive to make playing baseball an enjoyable experience that will leave their players looking forward to next season.
2. Set an example of sportsmanship for players and their parents.
3. Support and encourage their players to develop their baseball skills to the best of their ability.

**Parents are expected to:**

1. Assist the coaches with practices and games. The more help the coaches have, the more that can be accomplished and the more fun the kids will have. Many practice drills can be run by parents having no particular baseball skills.
2. Provide, at a minimum:
  - a. A team manager The team manager contacts players about scheduling changes and cancellations, passes out schedules and other information, distributes and collects uniforms, and generally removes much of the administrative burden from the coaches. This function may be shared by several parents.
  - b. A scorekeeper - Keeps score at games.
  - c. A "bench monitor" - Helps the coach keep order on the bench during games.
3. Attend games and cheer for their teams.
4. Get their children to games and practices on time, and let the team manager know as far in advance as possible when their children must miss a game or practice.
5. Support the coaches.
6. Encourage their children to meet the expectations of players set out above.

**PARENTAL CONSENT AND EMERGENCY TREATMENT AUTHORIZATION**

I, \_\_\_\_\_  
as the parent/guardian of the above named child, have read and understand the foregoing "Code of Conduct and Expectations," and I promise that I and my child will abide by their requirements.

- a. I hereby give my approval for my child's participation in any and all activities of this program during the current season.
- b. I agree that my child shall use all required protective equipment; and I assume all risks and hazards incidental to such participation, including transportation to and from such activities.
- c. I hereby waive, release, absolve, indemnify and hold harmless Lakeshore Baseball & Softball Association, Inc., its officers, supervisors, coaches, sponsors, participants and persons transporting players to and from such activities, from any claim arising out of injury to my child.
- d. I agree that any medical insurance coverage or benefit available through Lakeshore Baseball and Softball Association, Inc. shall be secondary to any individual family or group coverage or benefit otherwise available on our behalf.
- e. I agree to return, upon request, the uniform and other equipment loaned, in as good condition as when received, excepting normal wear.
- f. hereby consent to any and all emergency medical treatment and/or emergency transportation required for the above named player, in the event that I am not available to personally grant such consent.

**Parent/Guardian please indicate whether this player has a history of any of the following:**

Ear infection	_____	Hay Fever	_____	Allergies to:	
Rheumatic Fever	_____	Frequent Sore Throats	_____	Plants	_____
Convulsions	_____	Frequent Colds	_____	Insects	_____
Diabetes	_____	Fainting	_____	Penicillin	_____
Asthma	_____			Other drugs	_____

Any other specific conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**(Signature of parent / guardian)**

\_\_\_\_\_  
**(Date)**