





# Little League. Baseball and Softball M E D I C A L R E L E A S E



**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 GUARDIAN AUTHORIZATION:

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)/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: \_\_\_\_\_

WARNING: PROTECTIVE EQUIPMENT CANNOT PREVENT ALL INJURIES A PLAYER MIGHT RECEIVE WHILE PARTICIPATING IN BASEBALL/SOFTBALL.  
Little League does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, sexual preference or religious preference.



### Northeast Los Angeles Little League Player Code of Conduct

I pledge to be responsible for my participation by following this code of conduct of Northeast Los Angeles Little League :

- I agree to accept authority and supervision in a positive manner all the times.
- I agree to seriously accept the responsibility and privilege of representing Northeast Los Angeles Little League.
- I agree to attend and participate in all scheduled games and practices when reasonably possible.
- I agree to follow all directions from the coach/manager & umpire.
- I agree to communicate positively with the coach/manager, umpires, teammates and opponents.
- I agree to treat my teammates, opponents, fan, umpires, and all other adults with dignity and respect.
- I agree to not use foul and/or disrespectful language and taunting with anyone.
- I agree to respect Northeast Los Angeles Little League officials and umpire decisions without argument.
- I agree to exercise self control at all times and set a positive example for others to follow.
- I agree to positively encourage teammates and refrain from being critical of or joking about their mistakes.
- I agree to be aware of safety and will not throw a bat, ball, or equipment in anger. I will remain in the dugout with my teammates during games when I'm not on the field.
- I agree to not be overly aggressive or have angry reactions when I make an out or error.
- I agree to win without bragging, lose without making excuses, and never give up.
- I agree to be respectful of the equipment of other players and Northeast Los Angeles Little League.
- I agree to practice good sportsmanship at all times. I will play hard but within the rules of Northeast Los Angeles Little League.

My signature verifies that I have read, understood, and will follow the Player's Code of Conduct.

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Player's Name

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Player's Signature

My signature verifies that I have read, understood, and will follow the Player's Code of Conduct. I will positively encourage my child to abide by the Code.

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Parent or Guardian's Signature

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Date

2016 Spring Season



**Northeast Los Angeles Little League Parent Code of Ethics**

- I pledge to provide positive support, care and encouragement for my child participating in Northeast Los Angeles Little League.
- I will encourage good sportsmanship by demonstrating positive support for all players, coaches and officials at every game and practice.
- I will place the emotional & physical well being of my child above any personal desire to win.
- I will provide support for coaches and officials working with my child to provide a positive and enjoyable experience for all.
- I will demand a tobacco, alcohol and drug free environment for my child and agree to assist by refraining from use of all noted substances at all games and practices myself.
- I will remember that the game is for the children.
- I will expect my child to treat other players, coaches, parents, fans and officials with respect regardless of race, sex, creed or ability.

I HAVE READ AND FULLY UNDERSTAND THE NORTHEAST LOS ANGELES LITTLE LEAGUE PARENT CODE OF ETHICS. I WILL MAKE EVERY EFFORT TO COMPLY WITH EACH CODE ABOVE.

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

Print Child's Name: \_\_\_\_\_

**Northeast Los Angeles Little League Photo Release**

"I, the undersigned, hereby give permission for images of my minor child(ren) named below, captured during regular and special activities of the Northeast Los Angeles Little League ("NELALL") through any means, to be used by NELALL and/or its affiliates for promotional purposes in any media whatsoever, without restriction as to alterations, and in conjunction with my own or a fictitious, or no, name. I consent to such uses and hereby waive all rights to compensation and any right to inspect or approve the finished product or image, regardless of format."

Print Child's Name: \_\_\_\_\_

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