## ST. JOSEPH'S CYO BASKETBALL 2019-2020 REGISTRATION FORM

<u>PLEASE PRINT NEATLY:</u>				
Athlete Name				
Address:			-	
City St		Zip Code		
Home Phone #				
Date of Birth / /		Gender:	_Male	Female
Grade:12345	_678	8 9 10	111	12
School attending: (Print)				
( <i>REQUIRED</i> ) Print the name of a Catholic Par Education/CCD. High School Boys must be pre-				ves Religious
Uniform Size: Shirt:YS (6-8) YM (10-12 Shorts:YS (6-8)YM (10-12)Y	, , ,			
Is this child playing on another Basketball team	during the same	season?Yes	No	
Female Parent/Guardian Name (Print)				
Male Parent/Guardian Name (Print)				
Female Parent/Guardian Cell Phone				
Male Parent/Guardian Cell Phone				
Female Parent/Guardian Email (Print)				
Male Parent/Guardian Email (Print)				

#### PARENT/GUARDIAN DECLARATION

I hereby give my child permission to participate for St. Joseph CYO. I have read the attached Sports Agreement and agree to all the policies for my child and myself. I will support this participation and will volunteer my time when called upon to assist at home games. I understand that participation in athletic activities may result in serious injury. By my signature, I do hereby waive, release, absolve, indemnify and agree to hold harmless the Parish of St Joseph, their employees and parish volunteers for any claim arising out of injury to my child as result of their participation in CYO Basketball.

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

Parent/Guardian Signature:

Registration Fee: \$75 for 1<sup>st</sup> & 2<sup>nd</sup> Grade Clinic \$160 for 3<sup>rd</sup> to 12 Grade Travel Teams Please make check payable to: St. Joseph CYO 96 Oakview Ave Maplewood, NJ 07040

# St. Joseph CYO Basketball Student – Athlete and Parent/Guardian Sports Agreement

## <u>Student – Athlete Agreement</u>

- 1. I understand that playing basketball for St. Joseph CYO is a privilege.
- 2. I will be respectful and observant of all rules and regulations
- 3. I understand that if I attend CCD, I must attend 75% of the Classes during the year
- 4. I will listen and follow my coach's instructions
- 5. I will be on time for all practices and games as required
- 6. I will call my coach in advance if I am unable to attend a practice or game
- 7. I will respect my teammates, the opposing players and coaches, and the decisions of the game officials
- 8. I will respect the equipment and property of St. Joseph Parish as well as those of the opposing parishes with whom we are competing and help clean up the gym after practices and games.
- 9. I agree to stay in the bench area when not playing in the game
- 10. I will properly care for and wear my complete uniform to all games
- 11. I will accept defeat Gracefully and victory Humbly
- 12. I will use only appropriate language and engage in sportsman like conduct at all times while representing St. Joseph CYO

### **Parent/Guardian Agreement**

- 1. I understand that if my child attends CCD class they need to attend 75% of the classes during the year
- 2. I will set a positive role model for all student athletes of St. Joseph CYO Basketball
- 3. I will attend all parent meetings when scheduled by the Athletic Director or my child's Coach
- 4. I will regularly check my email for communication from the Athletic Director and Coach
- 5. I will have my child show up on time for all games and practices and pick up my child on time at the conclusion of each practice or game unless other arrangements are made prior to the event.
- 6. I understand that it is my responsibility to provide or arrange for transportation for my child to all practices, home and away games.
- 7. I understand that all practices are restricted to just players and coaches unless otherwise instructed by the coaches. Please respect this policy and do not attend practices or send siblings or friends along to practices with your child.
- 8. I will be available to volunteer at St. Joseph home games, as assigned by the Parent Team Coordinator and will help with concession sales, 50/50 raffle and setting up and cleaning up the gym when necessary
- 9. I understand that the JV, Varsity and High School teams play in a competitive league environment against other Catholic parishes and the playing time in some games may not always be divided equally among the Student-Athletes. Coaches for the Rookie and Pee-Wee teams, have been instructed to divide the playing time as equally as possible among those Student-Athletes of those teams.
- 10. I will support my child's coach and their decisions.
- 11. I agree <u>NOT TO SPEAK</u> to my child's coach for <u>24 hours</u> prior to and for <u>24 Hours</u> after a game regarding their coaching philosophy, team strategy, play calling or the amount of playing time my child has or will receive
- 12. I understand that any concerns I have about the St. Joseph CYO Basketball Program must be submitted in writing to the Athletic Director.
- 13. I agree to sit in the designated fan areas of the bleachers. A parent is never to sit on the team bench.
- 14. I will support the decisions of all game officials
- 15. I will respect the opposing parish, players, coaches, fans and physical property
- 16. I agree to root in a positive manner at all times and restrict my comments and actions to those that will encourage rather than discourage. I will only use appropriate language at all times.
- 17. I will properly care for the game uniform given to my child. Machine wash in Cold Water, NO Bleach, and Hang Dry only do not use the Dryer, NO Ironing. Students-Athletes/Parents returning damaged uniforms outside of normal wear and tear will be charged a \$75 replacement fee.

#### PARENTAL/GUARDIAN CONSENT FORM AND LIABILITY WAIVER

#### \*\*Participants must fill out a separate form for each sport they participate in

PARTICIPANT'S NAME:	BIRTH DATE:	Grade		
PARENT/GUARDIAN'S NAME:				
HOME ADDRESS:	E-mail Address			
HOME PHONE:	EMERGENCY PHONE			
, (name of parent or guardian), grant permission for my child (name of child)				
	to participate in the Archdiocese of Newark CYO Youth Mi	nistry Athletic Program of		
Sport for the 2019-2020 Academic year.				
For value received. I agree on behalf of	of myself, my child's other parent if known or living			

(name of parent) \_\_\_\_\_\_\_, my child named herein, or our heirs, successors, and assigns, if any claim for my child's personal injury or wrongful death is commenced against the Archdiocese of Newark, Office of Youth and Young Adult Ministry ("OYM"), or the parishes involved in the aforementioned activity(ies), to defend, indemnify, and hold harmless OYM, its officers, directors, and agents, and all parishes within the Archdiocese, and the officers, agents, representatives, volunteers, and employees of either the Archdiocese or any parish thereof, and chaperones or representatives associated with the "Program" with respect to any and all actions, claims, or demands that may be made or brought against OYM, its officers, directors and agents, and all parishes within the Archdiocese, and the officers, agents, representatives, volunteers and employees of either the Archdiocese or any parish thereof, and chaperones or representatives associated with the "Program" with respect to any and all actions, claims, or demands that may be made or brought against OYM, its officers, directors and agents, and the Archdiocese of Newark and all parishes within the Archdiocese, and the officers, agents, representatives, volunteers and employees of either the Archdiocese or any parish thereof, and chaperones or representatives associated with the "Program", arising from or in connection therewith, and I agree to compensate OYM, its officers, directors and agents, and the Archdiocese of Newark and all parishes within the Archdiocese, and the officers, olunteers and employees of either the Archdiocese or representatives associated with the "Program" arising from or in connection therewith, and I agree to compensate OYM, its officers, volunteers and employees of either the Archdiocese or any parish thereof, and chaperones or representatives, volunteers and employees of either the Archdiocese or any parish thereof, and chaperones or representatives associated with the "Program" for reasonable attorney's fees and expenses arising in connec

**MEDICAL MATTERS:** I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child. Of the following statements pertaining to medical matters, <u>sign only those in accordance with your wishes.</u>

**Emergency Medical Treatment:** In the event of an emergency, I hereby give permission to OYYAM, its officers, directors and agents, and the Archdiocese of Newark and all parishes within the archdiocese, and the officers, agents, representatives, volunteers and employees of either the archdiocese or any parish thereof, and chaperones or representatives associated with the "Program" to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the above numbers, contact:

(1) Signature:	Date:	
Policy Number:	Group Number	
FAMILY HEALTH PLAN CARRIER:		
Telephone:()		
FAMILY DOCTOR:		
Telephone: _()		
NAME and RELATIONSHIP:		

#### PLEASE TURN OVER AND COMPLETE BACK OF THIS FORM

Other Medical Treatment: In the event it comes to the attention of OYYAM, its officers, directors and agents, and the Archdiocese of Newark and all parishes within the archdiocese, and the officers, agents, representatives, volunteers and employees of either the archdiocese or any parish thereof, and chaperones or representatives associated with the "Program", that my child becomes ill with symptoms such as headache, vomiting, sore throat, fever, diarrhea, I want to be called REGARDLESS of the Time, etc.

(2) Signature:\_\_\_\_\_ Date: \_\_\_\_\_

Medications: My child is taking medication at present. My child will bring all such medications necessary, and such medications will be well-labeled. Names of medications and concise directions for seeing that the child takes such medications, including dosage and frequency of dosage are as follows:

#### (3) Signature: \_ Please sign ONLY if you have listed medications above in this part.

Date:

Specific Medical Information: OYYAM, will take reasonable care to see that the following information will be held in confidence.

Allergic reactions (medications, foods, plants, insects, etc.) ۶ Immunizations: Date of last tetanus/diphtheria immunization: \_\_\_\_\_  $\triangleright$ Does child have a medically prescribed diet? Any physical limitations? Is child subject to chronic homesickness, emotional reactions to new situations, sleepwalking, bedwetting, fainting? Has child recently been exposed to contagious disease or condition, such as mumps, measles, chicken pox, etc.?

If so, date and disease or condition: ۶

You should also be aware of these special medical conditions of my child \_\_\_\_\_\_  $\triangleright$ 

I fully understand the consequences of the foregoing statements and sign this PARENTAL/GUARDIAN CONSENT FORM AND LIABILITY WAIVER knowingly, freely, and willingly. (Your signature must appear below or your child will not be permitted to attend the "Program")

(4) Signature:	_ Date:
Mom's Cell Number	Mom's Email Address
Dad's Cell Number	Dad's Email Address

Parent or guardian **must** sign lines numbered 1 and 4. If your parish requires notarization of this form, please have notarized.

## ARCHDIOCESE OF NEWARK – CYO SPORTS CODE OF CONDUCT AGREEMENT

The Archdiocese of Newark and the Office of Youth & Young Adult Ministry, through the vehicle of sports, provides youth with an opportunity to practice Christian attitudes and responsibilities and to become friends with other children throughout the Archdiocese. CYO activities should be examples of the meaning of Christian sportsmanship. The guiding principle behind the enforcement of this code is that the behavior of everyone involved in CYO should not detract from the children's enjoyment of the sport.

## 1. COACHES

Acceptable standards of coaching behavior include:

- Set a good example for participants and fans to follow, exemplifying the highest moral and ethical behavior;
- □ Respect the judgment of officials, abide by rules of the event;
- □ Treat opposing coaches, participants and fans with respect;
- □ Instruct participants in sportsmanship and demand they display good sportsmanship;
- Coach in a positive manner, reflecting Christian values;

Penalties:

- Any coach ejected from a game because of unsportsmanlike conduct will be suspended for the next two games and may be subject to additional penalties.
- Any coach who physically OR verbally abuses another person may be suspended for the remainder of the season and may be disqualified from CYO participation
- Any coach who physically or verbally abuses an official during or after a game will be suspended for the remainder of the season and may be disqualified from CYO participation.

## 2. PLAYERS

Acceptable standards of participant behavior include:

- Treat opponents with respect; shake hands prior to and after contests;
- □ Respect the judgment of officials and abide by the rules of the contest;
- Accept seriously the responsibility of representing the school or parish by displaying positive behavior at all times;
- □ Play in a positive manner, reflecting Christian values. Do not bait or taunt opponents.

Penalties:

- Any player ejected from a game because of unsportsmanlike conduct will be suspended for two games and may be subject to additional penalties.
- Any player who physically abuses another player, participant or official may be suspended from play for the remainder of the season and may be disqualified from CYO competition.

## 3. SPECTATORS

Acceptable standards of spectator behavior include:

Remember that the players are children and are playing for their enjoyment, not yours.

- □ Remain seated in the spectator area during the games;
- □ Respect decisions made by contest officials;
- Be a role model by positively supporting teams and by not shouting instructions or criticism to the players, coaches or officials. Do not coach from the stands;

□ Make no derogatory comments or gestures to players, coaches, parents of the opposing team, officials or league administrators.

Penalties:

- □ Participating teams and their coaches are responsible for the conduct of their spectators.
- Any spectator who displays poor sportsmanship may be removed from the facility by an official, their team coach, a league official or the host gym person-in-charge.

Any spectator who interferes with the conduct of a CYO activity may, at the discretion of the spectator's parish, league, or the Archdiocese of Newark, be barred from attendance at subsequent CYO activities.

## 4. ENFORCEMENT

The parishes and leagues, under the supervision of the Archdiocesan CYO Office, shall enforce this code. Complaints regarding violations of this code shall be first brought to the attention of the athletic directors of the parishes / schools involved. Coaches, participants or spectators may be placed on probation or suspended from CYO activities for their actions.

I (We) have read the CYO Code of Conduct. I (We) agree to follow these guidelines in my (our) participation in all CYO activities.

Signature of Player

Signature of Parent (s)

Date\_\_\_\_\_

Revised 7/2017