



Spring 2020

REGISTRATION FEE: \$35 Make Checks Payable to: **City of Sevierville** [] CASH [] CHECK TODAY'S DATE: / /

PLAYER INFORMATION:

First Name: _____ Last Name: _____ Sex [] Male [] Female
 Address: _____ City: _____ Zip: _____
 Phone: (____) _____ - _____ Date of Birth: ____ - ____ - ____ Age will be on 5/1/2019 ____
 Contact Person: _____ Cell Phone: _____
 Name of School: _____ Number to receive text messages: _____

LEAGUE DESIGNATION:

Please check by the division your child will be in according to age. Players must play in their division specified by age unless approved by SMYBA Board of Directors. **Age cutoff for all age groups is May 1, 2020.**

- | | | | | |
|--|--|---|--|---|
| <input type="checkbox"/> Wee Ball
(Ages 3-4)
CO-ED | <input type="checkbox"/> T-Ball
(Ages 5-6)
CO-ED | <input type="checkbox"/> Coach Pitch
(Ages 7-8)
CO-ED | <input type="checkbox"/> Minor
(Ages 9-10)
CO-ED | <input type="checkbox"/> Major
(Ages 11-12)
CO-ED |
|--|--|---|--|---|

*SOFTBALL

If interested in girls' softball or 14u baseball, please contact the Athletic Office at 865-453-6946. If child is playing on team from last season
TEAM NAME: _____

MEDICAL INFORMATION:

Medication being taken: _____
 Pre-existing medical condition(s) – e.g. allergies, chronic illness, asthma, etc.

Other (non-parent) person to be contacted in case of emergency:
 Name: _____ Relationship: _____ Phone: _____

The undersigned, being the parent or legal guardian, does hereby give consent, without limitations to have the undersigned participant treated by any competent doctor in the event of illness or injury while participating in baseball/softball activities.

Participant Name:	Parent/Guardian Signature:	Date:
-------------------	----------------------------	-------

PARENT PARTICIPATION:

A successful youth baseball program depends on the involvement of parents and other volunteers. Please check the list below and chose an area in which you will be willing to help during the season. Thank you!

MOM	DAD		MOM	DAD	
[]	[]	Coach	[]	[]	Team Sponsor
[]	[]	Asst. Coach	[]	[]	Fundraising
[]	[]	Team Parent			

WAIVER:

*The undersigned states that he/she understands that the Smoky Mountain Youth Baseball Association is not and shall not be responsible for or liable for any illness, injury to person, or damage to property resulting from the program in which the undersigned is enrolling or from his/her participating in said program and the undersigned hereby releases the holds harmless the same Smoky Mountain Youth Baseball Association from any and all claims of any kind that the undersigned or his/her heirs, executors, administrators, or assigns may have or claim to have resulted in any way from his/her participation in said program. *
 "I certify that all information given on this sheet is true and accurate. I acknowledge my son's/daughter's eligibility will be forfeited if it is determined that any of this registration form has been misrepresented or falsified."

Please Note: Once a player plays up a division, the player cannot go back down.

Parent/Guardian Signature: _____ Date: _____

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.*

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

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.

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.

Student-Athlete Name Printed

Student-Athlete Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date

Athlete/Parent/Guardian Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet and Acknowledgement of Receipt and Review Form

What is sudden cardiac arrest?

Sudden cardiac arrest (SCA) is when the heart stops beating, suddenly and unexpectedly. When this happens, blood stops flowing to the brain and other vital organs. SCA doesn't just happen to adults; it takes the lives of students, too. However, the causes of sudden cardiac arrest in students and adults can be different. A youth athlete's SCA will likely result from an inherited condition, while an adult's SCA may be caused by either inherited or lifestyle issues.

SCA is NOT a heart attack. A heart attack may cause SCA, but they are not the same. A heart attack is caused by a blockage that stops the flow of blood to the heart. SCA is a malfunction in the heart's electrical system, causing the heart to suddenly stop beating.

How common is sudden cardiac arrest in the United States?

SCA is the #1 cause of death for adults in this country. There are about 300,000 cardiac arrests outside hospitals each year. About 2,000 patients under 25 die of SCA each year. It is the #1 cause of death for student athletes.

Are there warning signs?

Although SCA happens unexpectedly, some people may have signs or symptoms, such as:

- fainting or seizures during exercise;
- unexplained shortness of breath;
- dizziness;
- extreme fatigue;
- chest pains; or
- racing heart.

These symptoms can be unclear in athletes, since people often confuse these warning signs with physical exhaustion. SCA can be prevented if the underlying causes can be diagnosed and treated.

What are the risks of practicing or playing after experiencing these symptoms?

There are risks associated with continuing to practice or play after experiencing these symptoms. When the heart stops, so does the blood that flows to the brain and other vital organs. Death or permanent brain damage can occur in just a few minutes. Most people who experience SCA die from it.

Public Chapter 325 – the Sudden Cardiac Arrest Prevention Act

The act is intended to keep youth athletes safe while practicing or playing. The requirements of the act are:

- All youth athletes and their parents or guardians must read and sign this form. It must be returned to the school before participation in any athletic activity. A new form must be signed and returned each school year.

Adapted from PA Department of Health: Sudden Cardiac Arrest Symptoms and Warning Signs Information Sheet and Acknowledgement of Receipt and Review Form. 7/2013

- The immediate removal of any youth athlete who passes out or faints while participating in an athletic activity, or who exhibits any of the following symptoms:
 - (i) Unexplained shortness of breath;
 - (ii) Chest pains;
 - (iii) Dizziness
 - (iv) Racing heart rate; or
 - (v) Extreme fatigue; and
- Establish as policy that a youth athlete who has been removed from play shall not return to the practice or competition during which the youth athlete experienced symptoms consistent with sudden cardiac arrest
- Before returning to practice or play in an athletic activity, the athlete must be evaluated by a Tennessee licensed medical doctor or an osteopathic physician. Clearance to full or graduated return to practice or play must be in writing.

I have reviewed and understand the symptoms and warning signs of SCA.

Signature of Student-Athlete

Print Student-Athlete's Name Date

Signature of Parent/Guardian

Print Parent/Guardian's Name Date