

Youth Spring Sports Information

Register Online at:
farmvillenc.recdesk.com

T-Ball:

3-4 and 5-6 age groups.

Games and Practices will be held at the Athletic Complex.

Games will be during the week.

Softball:

7-8, 9-10, 11-12 and 13-16 age groups.

Games and Practices will be held on Bundy with potential of some games on the high school field. Teams will possible have games outside of Farmville (i.e. Greene County).

Age groups may be divided/combined based on numbers.

Soccer:

2-4, 5-6, 7-8, 9-10, 11-12 age groups.

Age groups may be combined based on numbers.

Games will be played on Saturdays.

Baseball:

7-8, 9-10 age groups

Age groups may be combined based on numbers. Games and Practices will be held at the Athletic Complex. ***We will not be a part of any local leagues. We will need at least two teams in each age group to have a baseball program. If we do not get these numbers we will cancel this program and refund players registration league. This league will be an instructional league, non competitive.***

Fees: \$40.00

Register Online at:
farmvillenc.recdesk.com

Or you may register in person at
Parks and Recreation in Town Hall

Payment must be made by Cash, Check, or
Money Order payable to the Town of
Farmville if mailed or brought in.

Parents Code of Ethics

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches and officials at every game, practice, or other youth sports event.
- I will place the emotional and physical well-being of my child ahead of a personal desire to win.
- I will insist that my child play in a safe and healthy environment.
- I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- I will demand a sports environment for my child that is free from drugs and alcohol, and will refrain from their use at all youth sports events.
- I will remember that the game is for youth - not for adults.
- I will do my very best to make youth sports fun for my child.
- I will ask my child to treat other players, coaches, fans and officials with respect regardless of race, sex, creed or ability.

Players Code of Ethics

- I will remember at all times that I am a member of a team and will not place my own self-interests above those of my team.
- I will not cast blame on my teammates, we will win together as a team and we will lose together as a team.
- I will demonstrate self control and respect for others at all times, be they officials, spectators, or other athletes.
- I will remember that participation in athletics is a privilege that is not to be abused by unsportsmanlike like conduct.
- I will treat my opponents with respect, shake hands after competition and congratulate them on their performance.
- I will respect the integrity and judgment of the officials.
- I will remember that improper behavior while in uniform reflects poorly upon my parents, my community, my organization and myself.
- I will understand and abide by the rules of the games.
- I will accept victory with grace and defeat with dignity.
- I will remember that school is more important than my athletic activities and I will give 100% in the classroom, just as I do in my sport.

Town of Farmville Youth Spring Sports

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Farmville Parks and Recreation
3672 North Main Street
Farmville, NC 27828
252-753-6712

2020 Spring Sports

Register Online at: farmvillenc.recdesk.com

The Town of Farmville Parks and Recreation provides opportunities to people of all ages to participate in quality organized recreation programs through leagues, special events, camps and programs. We strive to teach fundamental skills and rules, teamwork and sportsmanship in a fun atmosphere with the leadership of well-trained volunteers and staff.

Participant Name: _____		Sex: M or F	Date of Birth: ___/___/___	Age: _____
Parent/Guardian Name: _____		Email: _____		
Address: _____		City: _____	State: _____	Zip Code: _____
Home Phone: _____		Cell Phone: _____	Work Phone: _____	
Cell Phone Carrier (Text-Reminders Available): _____				
Sport:	T-Ball	Soccer	Softball	Baseball
Age group:	3-4 5-6	2-4 5-6 7-8 9-10 11-12	7-8 9-10 11-12 13-16	7-8 9-10
T-Shirt Size:	YS YM YL YXL AS AM AL AXL	<i>(Please choose a size)</i>		
Non-Parent Emergency Contact: _____		Phone #: _____		
List any Medical Problems or Special Needs: _____				

We may be unable to accommodate any "play-up" or special requests.

We may have to combine age groups if registration numbers are low in some age groups.

The Town of Farmville Parks and Recreation Department welcomes the participation of all individuals, including those with disabilities or special needs. We are committed to compliance with the ADA and will provide reasonable accommodations to facilitate participation in our program. To ensure that reasonable accommodations are in place, program registration or accommodation requests should be received at least two weeks prior to the start date of the program. The Town of Farmville Parks and Recreation Department recommends that parents or guardians consult their participant's pediatrician or health care professional to assess their participant's ability to participate in the athletic program. It is requested that parents or guardians provide in writing any additional instructions for the specific condition or need of their participant.

I hereby pledge to provide positive support and care for my child participating in youth sports by encouraging and demonstrating good sportsmanship for all players, coaches, and officials at every game, practice and youth sports events. I will ask my child to treat other players, coaches, fans, and officials with respect regardless of race, sex, creed, or ability.



Photography Waiver: Pictures may be taken of my child while participating in Town activities and may be used for program publicity. If you do not concur please check this box.

Release and Indemnity Agreement: I understand that participating in the recreational program selected involves risk of injury. These risks include inclement weather, accidents while traveling, equipment problems or failures, contacts with actions of other participants, slips/trips/falls, and musculoskeletal injuries, among others. I choose for myself or for my child to participate in the selected programs despite the risks.

By signing the basketball registration form, I acknowledge all risks of injury, illness and death and affirm that I have assumed all responsibility of injury, illness or death in any way connected with participation in the program. I also agree for myself and for any child participant to follow all rules and procedures for the program and to follow reasonable instructions of the teachers and supervisors of the program.

In return for the opportunity to participate in this program, I agree for myself and for my heirs, assigns, executors and administrators to release, waive and discharge any legal rights I may have to seek payment or relief of any kind from the City, its employees or its agents for injury, illness or death resulting from this program. If I am registering a child for a program, I agree that I am a parent, legal guardian, or am otherwise responsible for the child whose application I am submitting and that I release, waive, and discharge any legal rights that I may request on behalf of the child participation in the program. I also agree not to sue the Town, its employees or its agents and agree to indemnify the Town for all claims, damages, losses, or expenses, including attorney's fees, if a suit is filed concerning an injury, illness or death to me or my child resulting from participation in the program.

Parents Code of Ethics: I have read and fully understand the Parents Code of Ethics. I hereby pledge to follow and obey the Code of Ethics to provide a safe and supportive positive atmosphere for my child and the other children in the program.

Players Code of Ethics: I have read and fully understand the Players Code of Ethics. I hereby pledge that I have reviewed this with my child and they will obey the Code of Ethics to provide a safe and positive learning atmosphere for themselves and other participants in the program.

PARENT/GUARDIAN SIGNATURE _____ **DATE** _____

Volunteer Coaches Needed! Volunteer coaches will work with teams under the direction of the Farmville Parks and Recreation. *Would you or your spouse be interested in coaching?*

Yes ___ No ___ Head Coach ___ Assistant Coach ___ Shirt Size: _____

For Office Use Only:

League Age _____

League: _____

Fee Paid: _____