



**LA MIRADA BASEBALL ASSOCIATION
SELECT DIVISION APPLICATION**
P.O. Box 206, La Mirada, CA 90637 www.lmba.org

PLAYER AGENT USE ONLY:	
<input type="checkbox"/> Junior	<input type="checkbox"/> Senior
Select Division Team:	
8U <input type="checkbox"/>	9U <input type="checkbox"/> 10U <input type="checkbox"/> 11U <input type="checkbox"/> 12U <input type="checkbox"/>
La Mirada Resident: YES <input type="checkbox"/> NO <input type="checkbox"/>	

PLEASE PRINT

APPLICANT'S NAME: _____ PRIMARY PHONE: _____

ADDRESS: _____ CITY: _____ ZIP CODE: _____

DATE OF BIRTH: _____ AGE AS OF NEXT AUGUST 31st _____ SCHOOL (incl. City): _____

FATHER/GUARDIAN MOTHER/GUARDIAN

Name: _____ Name: _____

Cell phone: _____ Cell Phone: _____

E-Mail: _____ E-Mail: _____

Jersey size (**Please check one**): YS YM YL YXL AS AM AL AXL A2X

Jersey number: 1st choice _____ 2nd choice _____

BASEBALL EXPERIENCE

Years of baseball experience: _____ Last year and season played: _____

Last "Rec Ball" organization and team applicant played: _____

Any travel ball experience?: YES NO If so, what organization and team: _____

Pitching experience?: YES NO If so, what organization and team: _____

Does applicant *bat*: LEFT RIGHT Does applicant *throw*: LEFT RIGHT

What are top 3 positions applicant plays?: _____

EMERGENCY CONTACT INFORMATION

Emergency Contact: _____ Emergency Phone: _____

EMERGENCY AUTHORIZATION

I (we) the undersigned parent(s) or legal guardian of _____, a minor do hereby authorize and consent to any X-ray, examination, anesthetic, medical or surgical diagnosis rendered under the general or special supervision of any member of the medical staff and emergency room staff licensed under provisions of the Medical Practice or a Dentist licensed under the Dental Practice Act and on the staff of any acute general hospital holding a current license to operate hospital from the State of California Department of Public Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power to render care, which the aforementioned physician in the exercise of his best judgment may deem advisable. It is understood that effort shall be made to contact the parent(s) or guardian prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the parents or guardian cannot be reached.

Does child have any history of respiratory illness, allergies or have any physical or mental disorders or limitation of any kind? (Yes/No) _____

Please list any medications taken regularly: _____ Medical Insurance Carrier: _____

Family Physician: _____ Phone Number: _____ Policy Number: _____

CODE OF CONDUCT

Yes, I have read, received a copy of, and agree to abide by the La Mirada Youth Sports Code of Conduct and LMBA Rules & Regulations.

SELECT DIVISION PLAYER/PARENT COMMITMENT AGREEMENT

Yes, I have read, signed, and am attaching a copy of the Select Division Player/Parent Commitment Agreement. (Application will be deemed incomplete without a signed Commitment Agreement)

PARENT OR GUARDIAN AUTHORIZATION AND WAIVER OF LIABILITY

I (we) the parent(s) or guardian of the above named applicant for the La Mirada Baseball Association Programs, hereby give my (our) approval to his/her participation in any and all baseball activities. I (we) assume the risks and hazards incidental to such participation including transportation to and from activities, and I (we) do hereby waive, release, absolve, and indemnify and agree to hold harmless the La Mirada Baseball Association, the organizers, sponsors, supervisors, participants and persons transporting my (our) son (daughter) to or from activities for any claim arising out of an injury to my (our) son /daughter, except to the extent and in amount covered by accident or liability insurance.

Signature: _____ Date _____



La Mirada Baseball Association SELECT DIVISION Player/Parent Commitment Agreement



Parents, Players, Managers, and Coaches:

La Mirada Baseball Association (LMBA) has created a Select Division designed to provide a more advanced playing level on a year-round basis to those that are interested. Select Teams will play baseball against Select Teams from other PONY organizations utilizing the All-Star rules as adopted by PONY (and modified for the West Zone). As a result of the "inter-league" play within the Select Division, players will need to travel to other Cities. Select Teams will also likely engage in additional practices, fundraising efforts, and other activities as compared to non-Select Teams. In consideration of the travel and other activities, persons placed on a Select Team will incur additional expenses (in addition to the registration fee).

LMBA will schedule tryouts for placement on a Select Team, however, player selection for each Select Team shall be at the sole discretion of the Select Team manager with input and approval of the Select Division Committee. Selection shall be based upon baseball skill, baseball experience, commitment to the Select Team (including ability to attend/participate in practices, games, optional tournaments, and All-Star tournaments, and ability to participate in Team fundraising events), commitment to LMBA, and other Team/League requirements.

Any player that is selected onto a Select Team must commit to the team from November 1st (or from placement on the team) through July 31st (or the natural end of the All-Star Tournament Season) of the following year.

Select Teams are still a vital part of LMBA and teams will still have mandatory volunteer duties for LMBA (e.g., snack shack duty, fireworks booth duties, etc.).

Important Registration Information

All players who are *selected* to a Select Team will be required to pay an annual *non-refundable* registration fee of \$650 (payable at a rate of \$250 *within fourteen (14) calendar days of selection to a Select Team – and no later than November 30, 2017; \$200 due on or before January 15, 2018; and \$200 due on or before February 15, 2018*). This fee is payable to LMBA and will be used to cover the cost of LMBA registration, insurance, home & away uniforms (including mandatory pants, jersey, helmet, belt, and socks), Select Team registration fee with the PONY/Irvine Select League, team registration fees to host leagues for two (2) tournaments, and other amenities.

If the Select Team is also chosen as one of LMBA's All-Star teams during the PONY All-Star Tournament, players will be responsible for all registration fees and deposits associated therewith. Selection to an All-Star team is *not* guaranteed, and, depending upon which Division the Select Team manager chooses to enter, the Select Team may be ineligible for All-Star competition. Please consult with the Team manager for more information.

Failure to comply with this Commitment Agreement and/or other team/league commitments could subject your child to being removed from the Select Team and will bar your child from consideration for placement on a future Select Team or All-Star team.

It is an honor to be selected to represent the City of La Mirada and LMBA on a Select Team, and we hope you will consider this opportunity seriously. In order to be placed on a Select Team, LMBA requires a commitment from both the player and the player's parent(s).

Please read and initial the following Select Team / League commitment statements:

_____ We are committed to the Select Team through July 31st. Although the main season for the Select Team shall be January 1st through May 31st, Select teams may conduct practices, participate in tournaments (including All Star Tournaments), participate in fundraising, or other team activities throughout any portion of the year, and Select Team players must commit to fulfilling such activities through July 31st (or the natural end of the All-Star Tournament Season).

_____ We are committed to the team for all practices and games. Practices are crucial to a team's success. It is understood that the Select Team manager may choose to practice 4 – 5 times per week in preparation for Select Division Games and/or tournaments. Game schedules will not be known until right before the commencement of the season, but typically includes two games per week – with one played at Los Coyotes and one played a field in another City.

_____ We are aware of the possibility of additional personal expenses. Although the registration fee covers the cost for all regular season Select Division games, Select Team managers may decide to participate in additional tournaments, utilize commercial batting cages, purchase additional jerseys or practice shirts, and participate in other activities which may result in additional personal expenses. A Select Team manager may conduct fundraising activities to offset the registration fee and/or other additional expenses.

_____ Participation on LMBA Select Teams involves travel, and we are aware of the personal expense of travel. Although Select Teams will typically play at least one game per week at Los Coyotes, game schedules typically require Select Teams to travel to other cities located throughout Central and Southern California once per week. Parents must ensure that your child is present for and arrives on time for all games (and pre-game warm-ups) – even if not played locally. The parent must recognize this and assume responsibility for all travel accommodations and expenses as necessary. A Select Team manager may conduct fundraising activities to offset such travel expenses.

_____ Absences from team events must be verifiable and communicated to the team manager (verifiable: illness, school events, religious events or emergencies). This is a team sport and individual absence from team events impact the entire team and can hinder morale and performance. If you are aware of dates that your child will **not** be available for Select Team events, you must indicate said dates below.

_____ Select Teams are competitive and all players may not play in all games, nor are they guaranteed specific playing time. It will be the goal of each Select Team manager to develop each player to be able to play at the competitive level demanded by the Select Division. Although we encourage Select Team managers to allow all players to participate in every game, the Team Manager is responsible for determining which players will play in each game, how much playing time the player will get, and which position(s) the player will play – and LMBA will support the Team Manager in doing so.

_____ As a parent, I understand that I am required to abide by the La Mirada Youth Sports Code of Conduct while my child participates with the Select Team at **any** team event, and that my child needs to have and maintain at all times a grade point average (GPA) of 2.0 or its equivalent.

_____ We will support the Select Team and League and provide service hours as directed by the Team Manager and/or LMBA. Such service hours could include, but are not limited to, field preparation, field maintenance duties, snack shack coverage, and other similar activities.

_____ We understand that failure to fulfill all of our commitments (including providing service hours and participating in all practices) could result in less playing time and/or removal from the Select Team.

I understand and agree to the player/parent commitment and verify that my child _____ meets all eligibility requirements – including residency requirements. (Name of child)

Player's Date of Birth: _____ Player's Residence: _____

Player's School of Attendance and City: _____

Please check one:

My child does or does not participate in a conflicting season (soccer, baseball, basketball, football etc.)

My child will be on vacation and not available from _____ to _____

Parent signature and date:

Player signature and date:

_____ **Please include my child in the balloting**

_____ *To be signed if child is selected to the team.*

Contact Phone and Email for parent(s): _____