

**TEAM CODE OF CONDUCT AND PHOTO/MEDICAL RELEASE**

**Team Name** \_\_\_\_\_ **Grade** \_\_\_\_\_ **BOYS or GIRLS Div.** \_\_\_\_\_

**Head Coach** \_\_\_\_\_ **Assistant Coaches** \_\_\_\_\_

<b>Player Name (Print)</b>	<b>Jersey Number</b>	<b>Parent Name(s) (Print)</b>	<b>Parent Signature</b>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

**By signing this, I hereby pledge to live up to the Youth Basketball League Code of Conduct listed on the reverse.**

## **TEAM CODE OF CONDUCT**

*Department of Library and Recreation Services Team Code of Conduct include, but is not limited to the following:*

### **FOR PLAYERS AND PARENTS**

1. I will treat other players, parents, coaches, fans, referees, timers and recreation staff with respect.
2. I will show good sportsmanship before, during, and after each game regardless of the outcome.
3. I will provide positive reinforcement to ALL players and coaches.
4. I will adhere to the established rules and regulations of the school, league and/or team.
5. I will monitor the behavior of those people attending the games with me at all times.
6. I will Play Hard, Play Fair, Play Safe, Cheer Positively and **HAVE FUN!**

### **FOR PARENTS**

1. I will remember that the game is for youth – not adults.
2. I will place the emotional and physical well-being of my child ahead of my personal desire to win.
3. I will trust the decisions and judgment of the Library and Recreation Services Staff and game officials.
4. I will remain in the designated spectator's areas before, during, and after each game.

### **MEDICAL/PHOTO PERMISSION RELEASE**

I authorize the City of Daly City Recreation Staff to inform any licensed physician/surgeon/dentist to proceed with any medical treatment as seen fit or prescribed by a licensed physician/surgeon/dentist, to the minor named above. Any expenses and related costs generated by these steps, treatments, medications, x-rays, anesthetics, or procedures shall be paid by the undersigned. The undersigned agrees to indemnify and hold harmless, the City of Daly City, its Council, Officers, Boards, Commissions, Agents and Employees for any loss or liability which results or is alleged to have results from participation in this program. The undersigned also agrees to grant full permission to the City of Daly City to use my name and my child's name and photographs, videos, motion pictures or recordings for any publicity without obligation or liability.

***All players and parents must sign the back of this form!***