



Department of Parks and Recreation – Recreation Division
101 Field Point Road - Greenwich, CT 06836-2540
Phone: 203-618-7649
Email: recreation@greenwichct.org

2022 Small Fry I Baseball Age 6



ACTIVITY NUMBER: 10400

SECTION: SF

DESCRIPTION: An instructional league for 6 year-olds that incorporates coach pitching and using the tee if necessary. Coaches will pitch to the players on their team. If a player does not put the ball in play after the 5th pitch, the tee will be brought out. There are no strike outs. This program will meet on Saturday afternoons only. Practice will precede a 3-inning game. Total time for practice and game is 1.5 hours.

AGE REQUIREMENT: MUST be 6 years old on/before April 30, 2022. Children 5 years of age, NOT turning 6 on/before April 30, 2022 play in the T-Ball League and 7 year-olds play in the Small Fry II league. *An advanced Small Fry Program (II) is offered for 7 year-olds; 5 year-olds may play T-Ball. Visit the Town's Website for more information on both of these programs - www.greenwichct.gov.* Copy of birth certificate, passport or baptismal record **is required** for those who did not participate in the Town's T-Ball program at Bendheim WGCC and must be attached to registration form.

REGISTRATION DATES:

- Online: Opens **Tuesday, February 1** - online registration is only available to Greenwich residents. To register online go to www.greenwichct.gov/webtrac and sign-in to your account.
- Mail-in for non-account holders/non-residents: Begins **Tuesday, February 22** - application should not be postmarked earlier than February 22. Registration closes Friday, March 18 or when the program has filled; space is limited.

2022 Residency must be verified before completing this application. www.greenwichct.gov/residency

Non-residents: primary family member and all participating family members, over 25 years, must provide identification and proof of address. Participants under 25 years, require a copy of birth certificate, passport, or guardianship.

PROGRAM: Six-week program that begins on April 23 (depending on field conditions) through June 4. Practices and games will be on Saturdays between 1 p.m. – 5 p.m. at the Bendheim Western Greenwich Civic Center Barradas Field. **Participants will receive a schedule with team appointment and playing times for the season prior to the first day.** Playing time will vary each Saturday within the 1 p.m.– 5 p.m. time span.

TEAMS: Players will be assigned to a team based on the school they attend. We make no guarantees but will try to handle special requests or accommodations on a “first-come, first-serve” basis.



Department of Parks and Recreation – Recreation Division
 101 Field Point Road - Greenwich, CT 06836-2540
 Phone: 203-618-7649
 Email: recreation@greenwichct.org

COACHES: Volunteer coaches are **ESSENTIAL** to this program. Acceptance of ALL applicants and number of teams depends on the number of volunteer coaches. Coaches will also be subject to a background check.

Anyone interested in coaching must attend the League Coaches meeting: **Tuesday, April 5, 6 p.m.** at the Bendheim Western Greenwich Civic Center, 449 Pemberwick Road. Additional information will be provided.

**VOLUNTEER COACHES ARE ESSENTIAL TO THIS PROGRAM
 WITHOUT THEM THERE IS A POSSIBILITY YOUR CHILD MAY NOT HAVE A TEAM TO PLAY ON**

_____ I am interested in **Head Coaching** **Assistant Coaching** and will fill out the required background check and attend the clinics and meetings listed.

_____ I am not interested in head/assisting coaching, but would like to help my child's team by:

_____ Team Parent _____ Bench Monitor

Name _____ Phone _____

Email _____

FEE: \$98 payable to **"Town of Greenwich"**

There are no refunds and we do not pro-rate fees. Requests for credit will only be considered if received in writing prior to the start of the program. There is a \$15 administrative fee for credits and a \$25 fee for any returned checks. *We accept Visa, Master Card, American Express and Discover credit cards for resident on-line registration.

COMMENTS:

- **COVID-19 safety measures shall be in effect as necessary and are subject to change.**
- Players supply their own fielding glove
- Team shirts and hats will be provided
- Game schedules and weather updates will be available on our Recreation Sports website at www.teamsideline.com/greenwichct. You can sign up for automated email and/or text alerts from this website. In addition, you can call the weather hotline number at 203-861-6100.
- If mailing application and payment, please send to the following address:

Bendheim Western Greenwich Civic Center
 449 Pemberwick Rd.
 Greenwich, CT 06831
 Attn: Small Fry I Baseball





Department of Parks and Recreation – Recreation Division
 101 Field Point Road - Greenwich, CT 06836-2540
 Phone: 203-618-7649
 Email: recreation@greenwichct.org

2022 Small Fry I Consent for Treatment Form (To be given to emergency personnel if necessary)

As parent (or legal guardian) of _____, I hereby give my consent for any emergency medical treatment as approved by his/her coach or other adult escort, in case of illness or injury while playing or in related activities. I understand that this is to prevent undue delay and to assure prompt treatment.

Signature or parent or legal guardian	Relationship to participant
---------------------------------------	-----------------------------

Home phone	Work phone	Cell phone
------------	------------	------------

Physician Name	Physician Phone
----------------	-----------------

Dentist Name	Dentist Phone
--------------	---------------

Any allergies or medical/physical conditions the staff should be aware of?

YES NO If yes, please explain: _____

Parents will be notified in case of serious illness or injury as quickly as they can be reached, but this information will make immediate treatment possible.

Has your child played T-Ball? Yes _____ No _____

MUST ALSO COMPLETE PROGRAM REGISTRATION AND RELEASE ON THE NEXT PAGE



**2022 Activity
Program Registration**
Email: recreation@greenwichct.org

	H/H #
--	-------

Small Fry 1	10400	Section #:
Participant's Name:		Gender:
Birth date:	Age:	School: Grade:
Parent/Guardian:		
Address:	Town:	State: Zip Code:
Cell Phone:	Email:	
Addition information:		

In Case of Emergency:		
Name:	Phone:	Relationship:
List any physical restriction:		
Allergies:		

INDEMNIFICATION AND RELEASE
THIS IS A LEGALLY BINDING DOCUMENT. DO NOT SIGN IT UNTIL YOU HAVE READ THE CONTENTS HEREOF AND UNDERSTAND THE SAME. IF YOU ARE IN DOUBT, CONSULT AN ATTORNEY PRIOR TO SIGNING THIS DOCUMENT.

The Undersigned (hereinafter referring to myself, my minor children or charges, my heirs and assigns) hereby agree(s) to assume all risk and bear all responsibility and to indemnify and hold the TOWN OF GREENWICH, its agents, representatives, servants, officers, and employees, harmless from and against any and all claims, demands, suits, proceedings, liabilities, judgments, awards, losses, damages arising out of injuries to any persons or property, including any and all costs and expenses incurred in the defense of such claims, demands, suits and proceedings including court costs and attorneys' fees resulting from, arising out of, or in any way related to or connected with my/our participation in the _____ program sponsored by the Town of Greenwich/use of Town of Greenwich property/facilities/apparatus or equipment thereof.

The Undersigned, does forever discharge the Town of Greenwich, its agents, representatives, servants, officers and employees from any and all claims including claims of negligence or carelessness, alleging damages and any and all causes of action which the Undersigned may have or may hereafter have, arising out of, related to, or in any manner connected with injuries or damages the Undersigned may sustain by reason of my participation in the above-described program or use of the Town of Greenwich property, facilities, apparatus or equipment.

The Undersigned, the participant or parent/guardian of the above-named person, who participates in programs organized by the Town of Greenwich Department of Parks and Recreation, assumes all risks and hazards incidental to the conduct of the activity and transportation to and from the activity. I am aware that participating in any recreational program can be a dangerous activity involving many risks of injury. I further understand there is inherent risk associated with the(se) activity(ies) and authorize emergency medical treatment and transportation in my absence.

Dated at Greenwich, Connecticut, this _____ day of _____ 202__.

Signature of Participant: _____
(or Parent or Guardian for participants under 18 years of age)

Date:	Check#	Receipt#	Proof _	Initials
--------------	---------------	-----------------	----------------	-----------------

CONCUSSION INFORMATION SHEET



**HEADS UP
CONCUSSION**

This sheet has information to help protect your children or teens from concussion or other serious brain injury. Use this information at your children's or teens' games and practices to learn how to spot a concussion and what to do if a concussion occurs.

WHAT IS A CONCUSSION?

A concussion is a type of traumatic brain injury—or TBI—caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. This fast movement can cause the brain to bounce around or twist in the skull, creating chemical changes in the brain and sometimes stretching and damaging the brain cells.



HOW CAN I SPOT A POSSIBLE CONCUSSION?

Children and teens who show or report one or more of the signs and symptoms listed below—or simply say they just “don’t feel right” after a bump, blow, or jolt to the head or body—may have a concussion or other serious brain injury.

SIGNS OBSERVED BY PARENTS OR COACHES

- Appears dazed or stunned.
- Forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent.
- Moves clumsily.
- Answers questions slowly.
- Loses consciousness (even briefly).
- Shows mood, behavior, or personality changes.
- Can’t recall events prior to or after a hit or fall.

SYMPTOMS REPORTED BY CHILDREN AND TEENS

- Headache or “pressure” in head.
- Nausea or vomiting.
- Balance problems or dizziness, or double or blurry vision.
- Bothered by light or noise.
- Feeling sluggish, hazy, foggy, or groggy.
- Confusion, or concentration or memory problems.
- Just not “feeling right,” or “feeling down.”

WHAT ARE SOME MORE SERIOUS DANGER SIGNS TO LOOK OUT FOR?

In rare cases, a dangerous collection of blood (hematoma) may form on the brain after a bump, blow, or jolt to the head or body and can squeeze the brain against the skull. Call 9-1-1 or take your child or teen to the emergency department right away if, after a bump, blow, or jolt to the head or body, he or she has one or more of these danger signs:

- One pupil larger than the other.
- Drowsiness or inability to wake up.
- A headache that gets worse and does not go away.
- Slurred speech, weakness, numbness, or decreased coordination.
- Repeated vomiting or nausea, convulsions or seizures (shaking or twitching).
- Unusual behavior, increased confusion, restlessness, or agitation.
- Loss of consciousness (passed out/knocked out). Even a brief loss of consciousness should be taken seriously.

WHAT SHOULD I DO IF MY CHILD OR TEEN HAS A POSSIBLE CONCUSSION?

As a parent, if you think your child or teen may have a concussion, you should:

1. Remove your child or teen from play.
2. Keep your child or teen out of play the day of the injury. Your child or teen should be seen by a health care provider and only return to play with permission from a health care provider who is experienced in evaluating for concussion.
3. Ask your child's or teen's health care provider for written instructions on helping your child or teen return to school. You can give the instructions to your child's or teen's school nurse and teacher(s) and return-to-play instructions to the coach and/or athletic trainer.

Do not try to judge the severity of the injury yourself. Only a health care provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days.

The brain needs time to heal after a concussion. A child's or teen's return to school and sports should be a gradual process that is carefully managed and monitored by a health care provider.

HOW CAN I HELP KEEP MY CHILDREN OR TEENS SAFE?

Sports are a great way for children and teens to stay healthy and can help them do well in school. To help lower your children's or teens' chances of getting a concussion or other serious brain injury, you should:

- Help create a culture of safety for the team.
 - » Work with their coach to teach ways to lower the chances of getting a concussion.
 - » Talk with your children or teens about concussion and ask if they have concerns about reporting a concussion. Talk with them about their concerns; emphasize the importance of reporting concussions and taking time to recover from one.
 - » Ensure that they follow their coach's rules for safety and the rules of the sport.
 - » Tell your children or teens that you expect them to practice good sportsmanship at all times.
- When appropriate for the sport or activity, teach your children or teens that they must wear a helmet to lower the chances of the most serious types of brain or head injury. However, there is no "concussion-proof" helmet. So, even with a helmet, it is important for children and teens to avoid hits to the head.



TO LEARN MORE GO TO >> cdc.gov/HEADSUP

JOIN THE CONVERSATION AT

↳ www.facebook.com/CDCHEADSUP

Content Source: CDC's HEADS UP campaign. Customizable HEADS UP fact sheets were made possible through a grant to the CDC Foundation from the National Operating Committee on Standards for Athletic Equipment (NOCSAE).