BOARD OF TRUSTEES
Gary Wall, Supervisor
Sue Camilleri, Clerk
Margaret Birch, Treasurer
Anthony M. Bartolotta, Trustee
Julie Brown, Trustee
Karen Joliat, Trustee
Donna F. Kelley, Trustee

WATERFORD TOWNSHIP

5200 Civic Center Drive
Waterford, Michigan 48329-3773
Telephone: (248) 674-5441 Fax: (248) 618-7674
www.waterfordmi.gov

Department of Parks & Recreation
Alison Swanson, Superintendent
Recreation Board Members
Connie Folk, Chairperson
Joshua Maly
Michael Healy
Dan Ludwig
Donna Kelley
Lisa McCoy
Richard B. Moody
J.R. Olerich
Rob Petrusha

2015 GIRLS SPRING SOFTBALL GRADES 3 – 8

Enclosed please find the 2015 Girls Spring Softball League Information. The 2015 Spring Softball League is offered to girls in grades 3 – 8.

Registration (Team & Individual) January 12 – March 5, 2015
Cost Per-Player: $50.00 Resident $55.00 Non-Resident
Late Registration March 6 – 12: A $10.00 late fee will be added and players will be placed onto teams on an as-needed basis.

The Parks and Recreation office will take team registration as well as individual registration. Individuals may register at the Recreation Office, and can be placed on a team according to the league's best interest. Grades can be combined to form teams. If enrollment is low in a grade, please note that grades may be combined in order to run the league.

Mandatory Coaches Meeting: Thursday, March 26, 2015 at 6:00PM
Waterford Recreation Center, 5640 Williams Lake Road

Season Begins: Saturday, April 25, 2015 (6 weeks)

If you had a team registered in our league last year and would like your roster e-mailed to you, please contact me at aswanson@twp.waterford.mi.us

Please notify our office by Thursday, March 5th if you are planning to coach this year. Please notify your players to register with the Waterford Parks and Recreation Department between January 12 and March 5, 2015. Thank you in advance for your cooperation!

Your Waterford Parks & Recreation

With us there are no boundaries

Waterford Parks and Recreation Department * 5200 Civic Center Drive, Waterford, MI 48329
Phone 248-674-5441 Fax 248-618-7674 www.waterfordmi.gov/parksandrec

2015 GIRLS SPRING SOFTBALL CALENDAR
GRADES 3 – 8

MONDAY, JANUARY 5	Information sent to 2014 coaches and players
MONDAY, JANUARY 12	**REGISTRATION BEGINS -** Team & Individual Registrations are taken at the Recreation Office, 5200 Civic Center Drive, Waterford, MI 48329 **Cost Per Player: $50.00 Resident / $55.00 Non-Residents**
THURSDAY, MARCH 5	**REGISTRATION DEADLINE –** Player waivers and payments must be submitted by this date. ***Late Registration March 6 – 12: A $10.00 late fee will be added and players will be placed onto teams on an as-needed basis.***
THURSDAY, MARCH 26	**MANDATORY COACHES MEETING – 6:00PM** **Waterford Recreation Center, 5640 Williams Lake Road**
WEDNESDAY, APRIL 8	**YOU SHOULD BE CONTACTED BY A COACH BY THIS DATE -** If you have not been contacted by a coach by this date, please contact our office at (248) 674-5441 and you will be given the name and phone number of your child's coach. Please do not contact our office before April 8th.
SATURDAY, APRIL 25	**SEASON BEGINS** 6 Week Season - Saturday Games ALL GAMES PLAYED IN WATERFORD
SATURDAY, MAY 23	**NO GAMES - HOLIDAY WEEKEND**
SATURDAY, JUNE 6	**SEASON ENDS**
SATURDAY, JUNE 13	**MAKE-UP DAY *(IF NEEDED)***

Waterford Parks and Recreation Department * 5200 Civic Center Drive, Waterford, MI 48329
Phone 248-674-5441 Fax 248-618-7674 www.waterfordmi.gov/parksandrec

2015 GIRLS SPRING SOFTBALL TEAM REGISTRATION FORM

DEADLINE TO REGISTER A TEAM THURSDAY, MARCH 5th

School: _____

Team Name:_____

Coach's Name: _____

E-Mail Address:_____

SCHEDULES WILL BE E-MAILED TO COACHES WHEN COMPLETED

Address: _____
Street City Zip

Phone:_____
Home Other

Phone number to be printed on schedules: _____

YOU WILL BE COACHING:

3rd Grade 4th Grade 5th Grade

6th Grade 7th Grade 8th Grade

IF YOU NEED MORE PLAYERS, PLEASE WRITE IN NUMBER: _____

IF YOU HAVE AN ASSISTANT(S), PLEASE GIVE:

_____
NAME HOME PHONE OTHER PHONE

_____
NAME HOME PHONE OTHER PHONE

Waterford Parks and Recreation Department * 5200 Civic Center Drive, Waterford, MI 48329
Phone 248-674-5441 Fax 248-618-7674 www.waterfordmi.gov/parksandrec

Volunteer Coach/ Employee – Background Check Form

POSITION: 2015 Spring Girls Softball ☐ Head Coach ☐ Assistant Coach

Have you coached for us in the past year? ☐ YES ☐ NO
If yes,
Last Sport Coached _____ Year/Season _____

Thank you for volunteering in the Waterford Parks & Recreation Department. It has been demonstrated in numerous studies that parents are the most important influence in a child's life, even into adolescence and early adulthood stages. A parent's first-hand demonstration of support for our programs establishes a pattern of cooperation that will stay with a child a lifetime. To ensure our children remain in a safe recreational environment we need you to complete the affidavit below and on reverse side

I, the undersigned volunteer, affirm that whether as an adult or juvenile, I HAVE AT ANY TIME:

(Please check yes or no. If you answer yes to any items, please provide a date and brief explanation below.)

Yes	No	
☐	☐	been convicted of, pleaded guilty to (whether or not resulting in a conviction), pleaded nolo contendere or no contest to, been diagnosed as having or treated for any mental or emotional condition arising from, resigned under threat of termination of employment or volunteer work for; any allegation, any conduct, matter, or thing (irrespective of the formal name thereof), constituting or involving (whether under criminal or civil law of any jurisdiction):

Yes	No	
☐	☐	any felony
☐	☐	any misdemeanor
☐	☐	rape or other sexual assault
☐	☐	drug/alcohol – related offenses
☐	☐	physical or sexual abuse of minor child
☐	☐	sexual harassment
☐	☐	sexual conduct with a minor
☐	☐	lewd and lascivious behavior
☐	☐	obscene literature
☐	☐	assault, battery, or other offense involving a minor
☐	☐	unfitness as a parent or custodian
☐	☐	endangerment of a child

Please complete the back of this document

Waterford Parks and Recreation Department * 5200 Civic Center Drive, Waterford, MI 48329
Phone 248-674-5441 Fax 248-618-7674 www.waterfordmi.gov/parksandrec

Confidential Employee / Volunteer Coach – Background Check

- Information requested is only for the purpose of obtaining criminal conviction information regarding persons having supervisory or disciplinary powers over a minor.
- I understand that I have been conditionally offered a position as an employee or volunteer by the **Waterford Parks & Recreation Department, (WP&RD)** subject to a criminal conviction history check.
- I acknowledge receipt of the Background Screening Policy and its contents.
- I understand that the information below is required by National Background Investigations, Inc., Stevensville, MD, for the criminal conviction history check. I authorize **WP&RD** to utilize this information for the sole purpose of obtaining a conviction only history file search.

Name _____
Last First Middle

Address:_____
Street City Zip

Phone Number: _____

Date of Birth: _____ / _____ / _____ Sex: Male Female
(circle one)

Social Security Number:_____ / _____ / _____

RELEASE OF INFORMATION

I,_____, hereby authorize any representative of the Waterford Township Parks & Recreation Department bearing this release to obtain information from files or other sources pertaining to my criminal conviction history background, including sentencing, probation and parole status. I hereby direct you to release such information upon the request of the bearer. This release is executed with the full knowledge and understanding that the information is for the official use of the Waterford Township Parks and Recreation Department. I hereby release to you, the institution or establishment which you represent including its officers, employees, and related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

_____ _____
Signature Date

This form will be destroyed after receipt of report from National Background Investigations, Inc.

Waterford Parks and Recreation Department * 5200 Civic Center Drive, Waterford, MI 48329
Phone 248-674-5441 Fax 248-618-7674 www.waterfordmi.gov/parksandrec

VOLUNTEER COACHES AGREEMENT FOR YOUTH SPORTS

All coaches affiliated with Waterford Township Parks and Recreation Department programs must be familiar with and adhere to the rules, regulations and philosophy established in each individual sports manager manual. As a volunteer coach, **I AGREE TO**:

- Treat each player, opposing coach, official, parent and league administrator with respect and dignity.
- Do my best to learn the fundamental skills, teaching and evaluation techniques, and strategies of my sport.
- Become thoroughly familiar with the rules of my sport.
- Become familiar with the objectives of the youth sports program with which I coach, and I will assist them in every way to conduct fair and impartial competitive contests.
- Uphold the authority of officials who are assigned to the contests in which I coach, and I will assist them in every way to conduct fair and impartial competitive contests.
- Learn the strengths and weaknesses of my players so that I might place them into situations where they have a maximum opportunity to achieve success.
- Conduct my practices and games so that all players have an opportunity to safely improve their skill level through active participation.
- Communicate to my players and their parents the right and responsibilities of individuals on my team.
- Cooperate with the administrators of our organization in the enforcement of rules, regulations and program philosophy, and I will report any irregularities that violated sound competitive or ethical practices or situations which may be deemed questionable or not in the best interest of the participants.
- Protect the health and safety of my players by insisting that all of the activities under my control are conducted for their psychological and physiological welfare, rather than for the vicarious interests of adults. I will report all injuries to parents and administrators as required.
- Have two adults present at all practice sessions.
- To complete all forms required.
- Return all equipment provided at the end of the season and report any defective equipment immediately.

Name _____
First Middle Last

I have read the rules and regulations and understand my responsibilities as a volunteer coach. I understand that my volunteer services as coach may be terminated by the Waterford Township Parks and Recreation Department for any violation of the Recreation Department's rules and regulations of for any conduct which violated the spirit of those rules and regulations and the philosophy contained in the sports manager manual. I also understand that my volunteer services may be terminated at any time by the Recreation Department without cause and without notice.

I have read all of the material contained on this page, and I understand, and I am in agreement with all that I have read. I further understand that a background check may be completed.

_____ _____
Signature Date

Waterford Parks and Recreation Department * 5200 Civic Center Drive, Waterford, MI 48329
Phone 248-674-5441 Fax 248-618-7674 www.waterfordmi.gov/parksandrec

2015 SPRING GIRL'S SOFTBALL - COACH COMMITMENT FORM

In an effort to prepare for the upcoming season, and to also provide all registrants with accurate information, we are asking that all coaches complete and **return this form to us by March 5th**. At the present time, we are not sure how many coaches are returning or how many coaches we will need for the 2015 Spring Girl's Softball season.

Coach's Name _____ Child's Name _____

Home Phone _____ Work Phone_____

Address _____ City _____ Zip _____

E-Mail Address: _____

In which grade/league will you be coaching?

☐ 3rd Grade ☐ 6th Grade

☐ 4th Grade ☐ 7th Grade

☐ 5th Grade ☐ 8th Grade

This form, when completed and returned to the Recreation Department, will allow us to better serve you and all of the participants. Thank you for taking the time to compete it. **Please return this Coach Commitment form along with the Confidential Background Check and Volunteer Agreement form by March 5th**.

Waterford Parks and Recreation Department * 5200 Civic Center Drive, Waterford, MI 48329
Phone 248-674-5441 Fax 248-618-7674 www.waterfordmi.gov/parksandrec

2015 SPRING SOFTBALL PROGRAM - SCHEDULING REQUEST

COACH _____ PHONE ( ) _____

SCHOOL_____ GRADE_____

DATE	REQUEST	REASON
Saturday, April 25		
Saturday, May 2		
Saturday, May 9		
Saturday, May 16		
Saturday, May 23	**NO GAMES – HOLIDAY WEEKEND**	
Saturday, May 30		
Saturday, June 6		

FORM MUST BE SUBMITTED BY COACHES MEETING OR REQUESTS WILL NOT BE ACCEPTED.
THURSDAY, MARCH 26, 2015 AT 6:00PM
Waterford Recreation Center, 5640 Williams Lake Road, Waterford, MI 48329

I _____ as coach for a team participating in the Waterford Parks & Recreation Spring Softball League, understand that this is a request **ONLY**. Circumstances may dictate that Waterford Parks and Recreation Department may not be able to honor all requests.

Mandatory coach's signature _____ **Date** _____

2015 SPRING SOFTBALL EQUIPMENT PICK-UP

The following days are scheduled pick-up days for equipment. There will be a scheduled field supervisor signing out equipment to coaches.

If you or a representative from your team can not make either day, you will need to call Alison Swanson, Recreation Supervisor and a message will be relayed to a field supervisor. The field supervisor will call you back to plan a pick up day based on their availability. **You must allow 24-48 hours if you are scheduling pick-up date different than the dates listed below!**

Rotary Park, 5485 Tubbs Road

Thursday, March 26, 2015 6:00 p.m. – 8:00 p.m.

Saturday, March 28, 2015 9:00 a.m. – 11:00 a.m.