

 **Welcome to the** 
**M.L.K BLASTERS YOUTH TRACK AND
FIELD CLUB**

Needed from Parents:

Completed and Signed Registration Packet

Proof of physical within last year

3 Copies of your child's birth certificate
(no originals please)

Copy of child's report card



First Day of Practice:
January 24, 2011 4:30-5:30 PM
Morse High School

Jan/February Practice Times:
M-T-Th 4:30-5:30PM

MLK BLASTERS YOUTH TRACK & FIELD CLUB
Membership Application

Date: _____

Boy

Girl

Athlete Name: _____

Date of Birth: _____

Parent/Guardian Name: _____

Address: _____

Home Telephone: _____

Cell number: _____

Other parent/Guardian contact: _____

Other phone number: _____

Email: _____

Have you participated on a track club before? __Yes __No

If yes, how many years? _____

Who was the last club you ran with and what year?

I hereby give my child permission to participate as a member of the
MLK Blasters Youth Track & Field Club.

Parent/Guardian Signature

Date

Head Coach: DeCola Groce 619-708-7615 dyglady@yahoo.com

Team Mom: Michelle Smith 619-208-7351

MLK BLASTERS YOUTH TRACK & FIELD CLUB

ATHLETE CODE OF CONDUCT

MLK Blaster athletes are required to conduct themselves in an appropriate manner that reflects the beliefs and philosophy of the club. MLK Blasters are required to:

Fulfill the responsibilities and expectations of being a MLK Blaster track athlete:

- Be Honest, Respectful and Reliable at all times.
- Make a commitment to sport training and follow through with that commitment.
- Dedicate yourself to improving, both as an athlete and as a person.
- Follow the policies and procedures of the MLK Blasters Youth Track Club.
- Maintain a C average (2.0 GPA) along with good citizenship (PROOF OF REPORT CARD REQUIRED)

Set an example for other athletes:

- Refrain from drug or alcohol use or using profanity.
- Avoid any behavior that may be misunderstood or misinterpreted by other athletes.
- Maintain self-control at all times.
- Treat everyone fairly within the context of the activity, regardless of gender, race, sexual orientation, religion, or economic status.
- Be helpful to and supportive of everyone.

Demonstrate good sportsmanship and Cooperation:

- Respect the rules and support the decisions of all coaches and sport officials
- Be respectful during ceremonies and help other athletes be the same.
- Praise other athletes for their efforts and encourage them to celebrate the successes of others.

I have read and understand the requirements of this Code of Conduct. I understand that I am expected to perform according to this code.

Athlete Signature

Date

Parent Signature

Date

MLK BLASTERS YOUTH TRACK & FIELD CLUB
Parent Code of Conduct

Athlete Name: _____

I will enjoy my child's opportunity to experience the benefits of sport.

- I will trust in my child's ability to have fun as well as to perform and achieve excellence on his/her own.

- I will help my child to learn the **right lessons from winning and losing** and from individual accomplishments and mistakes.

- I will respect my child's teammates and fellow parents as well as the players, parents and coaches from opposing teams.

- I will give only encouragement and applaud only positive accomplishments whether for my child, his/her teammates, their opponents or the officials.

I will respect my child's coach and support his/her efforts.

- I will not instruct from the sidelines unless asked to by the coach.

- I will insure that my child will attend all games and practices possible and, when not possible, I agree to inform the coach in advance.

- I will respect all facilities made available so my child can play games and practice his/her sport.

- I will respect any equipment or uniform that may be loaned to my child so that he/she can participate.

I will respect the officials and their authority during games.

I will never demonstrate threatening or abusive behavior or use foul language.

I will be responsible to report any perceived misconduct by coach, player, parent and official so it can be dealt with in the appropriate manner.

I will follow the policies and procedures of the MLK Blasters Youth Track Club.

Parent Signature

Date

MLK BLASTERS YOUTH TRACK & FIELD CLUB

Disciplinary Rules and Policies

The following may result in parent/coach meeting and suspension from the team and/or track meet:

- Violation of the athlete or parent code of conduct.
- Reported unacceptable behavior at practice or track meet (including use of profanity).
- Continued failure to complete or put forth a good effort at practice or track meet.
- Withdraw or Missing an event at a track meet.
- Continually late to or absent from practice.
- Not following the direction of a coach.
- Arguing or fighting at practice or track meet. .
- Continually causing tension or conflict within the team.

Athlete signature: _____

Parent signature: _____

Date: _____

Fundraising Policy

The team will host several fundraisers throughout the year. Funds generated from the fundraisers will be used for equipment purchases and special team events throughout the season such as barbeques, pizza parties etc. The bulk of the fundraiser money will go towards travel to the Youth Championships and/or USA T&F Junior Olympics.

- Each athlete will participate in a minimum of 2 fundraisers.

Athlete signature: _____

Parent signature: _____

Date: _____

MLK BLASTERS YOUTH TRACK & FIELD CLUB
Minor Release Form

Athlete's name: _____ Date of Birth: _____
Parent's/Guardians Name: _____ Home phone: _____
Activity: Youth Track and Field

RELEASE

I give permission for the minor in my custody to participate in the above-mentioned activity and hereby waive, release and discharge any and all claims or rights for damages for death, personal injury or property damage which I may have or which may hereafter accrue to me as a result of the said minor's participation in said activity. This release is intended to discharge in advance the promoters, sponsors, the San Diego City School District, USA T&F Association, MLK Blasters Youth Track & Field Club, the officials associations and any and all liability arising out of or connected in any way with said minor's participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above.

I further understand that serious accidents occasionally occur during said activity and that participation in such activity occasionally sustains mortal or serious personal injuries, and/or property damage, as a consequence thereof. Knowing the risks of said activity, nevertheless on behalf of said minor child, I hereby agree to assume those risks and to release and hold harmless all persons or entities mentioned above who, through negligence or carelessness, might otherwise be liable to me or my heirs or assigns for damages.

It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns.

Signature of Parent/Guardian: _____ Date: _____

CONSENT TO TREATMENT OF MINOR

In the event of sudden illness, accident or injury, which may occur while said minor is, engaged in an activity supervised by the MLK Blasters Youth Track & Field Club and their representatives, agents or assign, when neither the parents, or guardian or designated family physician can be contacted. I hereby give my consent pursuant to California Civic Code 25.8 for emergency treatment as shall be necessary under the circumstances by any physician licensed under the Laws of the State of California.

Signature of Parent or Guardian: _____ Date: _____

Family Physician: _____ Phone: _____

Insurance Company: _____

Pertinent Medical History Information (Epilepsy, Diabetes, Asthma, Allergies, etc.):

Emergency phone number other than parents/guardian
Name _____ Phone number _____

Head Coach: DeCola Groce 619-708-7615 dyglady@yahoo.com
Team Mom: Michelle Smith 619-208-7351

MLK BLASTERS YOUTH TRACK & FIELD CLUB
EXCHANGES, RETURNED CHECKS, REFUNDS,
PAST DUE ACCOUNTS

Because our uniforms and jumpsuits are custom made we cannot exchange or refund these items. There will be samples of clothing on site at registration.

If you have any doubts about the sizing please see them.

All returned checks are subject to a surcharge of **\$25.00**. Athletes will not be allowed to participate with their team until all fees are collected.

There are **NO REFUNDS**. All funds collected are used immediately to cover uniform orders, membership dues, etc.

Before you join the team, please be sure you and your child want to be here.

Before the first track meet all fees **must be paid by March 31, 2011**. If you owe any money, your child will not be allowed to participate in the track meets.

THERE ARE NO EXCEPTIONS TO THESE RULES

MLK BLASTERS YOUTH TRACK & FIELD CLUB

FREQUENTLY ASKED QUESTIONS

What should my child wear to practice?

Your child should wear comfortable clothing (Shorts, T-Shirt and Sweats). Any type of running shoe is appropriate.

What should my child bring with them to practices?

A water bottle is a necessity. A lightweight jacket or sweater is also needed for the chilly months. Midway through the season your child will need to bring a Sprinter Spike or Throw shoe (field events only) to practice to better enhance their training.

What about practicing on Rainy Days?

There will be regular scheduled practice if the weather consists of light rain (sprinkling). If there is heavy rainfall the day of practice, then practice will be cancelled.

What are my financial responsibilities?

- Purchasing your child's; Running Shoes & Track Spikes
- Track meets are your responsibility: ~10 local tracks @ \$9.00 per child (please see form titled Practices and Track Meets)
- Team Photos: ~\$20.00-\$40.00 (information will be sent home regarding dates and prices).

Why do you need copies of my child's birth certificate?

Because there are track meets which will require a copy of the birth certificate. All birth certificates will be kept in a secure and safe place.

Will my child be on a relay team?

Coach DeCola will chose who makes up the relay teams. Once the teams are announced it is the responsibility of the parents to make sure their child goes to the meet. There are always opportunities for every child on the team to be on the relay team at least once in the season. Please see Coach DeCola if you have any questions about the relay teams.

Who do I see if I have questions?

Coach DeCola will answer all questions regarding coaching. Michelle Smith will assist you with all paperwork, ordering, or any general information.

MLK BLASTERS YOUTH TRACK & FIELD CLUB

PRACTICES AND TRACK MEETS

PRACTICES:

The Blaster's track season begins January 24, 2011 and ends at the mid of July. Practices are held at Morse High School.

Tuesday, Wednesday and Thursday from 4:30-5:30 PM. **When Daylight Saving Time (DST) occurs on March 13, 2011 the NEW practice time will be from 5:00-6:30 PM.**

TRACK MEETS:

Track meets generally cost anywhere from \$8.00-\$10.00, per child. The parent pays this fee, not the team.

Our first meet usually takes place the second week in March; the last meet is mid-July. There are approximately 10-15 meets throughout the entire season. Track meets sometimes occur two weekends in a row, yet sometimes there is a two-week break.

Most track meets will last **all day Saturday (7 AM-5 PM)**. There are some meets, which will consist of both Saturday and Sunday. In order for your child to warm-up before the meet, he/she should **arrive 45-60 minutes before the track meet begins.**

Although it is not mandatory for you to stay after your child's event, we still encourage you to stay and support the other athletes from our team. The athletes have informed us that the cheers from the crowd help them find the determination to push on.

Thank You For Your Support!
We look forward to having a FANTASTIC Season!!!!!!!!!!
DeCola Groce

MLK BLASTERS YOUTH TRACK & FIELD CLUB
Team Medical Form

Athlete's name _____ Date: _____

Address: _____

Phone number: _____ Gender: F M Age: _____

Insurance Company: _____

Physician/Hospital/Clinic _____ Phone: _____

Has the athlete had the following? Explain "yes" answers

1. Injuries to head, neck, bones or joints	Yes	No
2. Any other injuries requiring medical attention	Yes	No
3. Seizures, blackouts or any episodes of unconsciousness	Yes	No
4. Heart trouble, heart murmur, high blood pressure	Yes	No
5. Any serious infectious disease	Yes	No
6. Hospitalization or operations in the past	Yes	No
7. Stomach, Intestinal, or urinary tract problems	Yes	No
8. Currently under care of a doctor	Yes	No
9. Taking any medication on a regular basis	Yes	No
10. Complex dental problems	Yes	No

Parent/Guardian signature _____

PHYSICAL EXAMINATION (to be completed by physician)

Height: _____ Weight: _____ Blood Pressure: _____
 Pulse: _____ General Appearance: _____
 Head: _____ Abdomen: _____
 Neck: _____ Genitalia/Hernias: _____
 Heart: _____ Back and extremities: _____
 Lungs: _____ Neurological: _____
 Chest: _____

Recommendations:

- There are no restrictions or special considerations to participate in track and field
- The following are limitations or special considerations:

- This person is disqualified from sports until further evaluation

Physician signature/hospital/clinic _____

Date _____



USATF MEMBERSHIP APPLICATION

New Member Renewal from previous year — USATF Number: _____

Please print or type information

Last Name _____ First name _____ Initial _____

Address _____

City _____ State Zip Code -

SEX M/F Age Today Date of Birth - -

USA Citizen? YES NO If no, country of Citizenship _____

Phone Number -

Club No. Club Name MLK Blasters Youth T&F club

Email _____

- Please check all applicable sports here:
- Track
 - Field
 - Road running/LDR
 - Cross Country
 - Ultra-marathon
 - Mountain/Trail
 - Race Walking

Membership Category Codes

Please check the codes below for use here. You may use one or more codes.

- | | |
|-------------------------------|-----------------------------------|
| AT: Athlete | PA: Parent |
| DA: Disabled Athlete | OF: Official-uncertified |
| | OA: Official - Assoc. certified |
| CH: Coach-uncertified | ON: Official - National certified |
| CD: Developmental certified | OM: Official - Master certified |
| C1: Coach - Level 1 certified | |
| C2: Coach - Level 2 certified | |
| C3: Coach - Level 3 certified | AD: Administrator |

By signature below, I, a prospective member of USA Track & Field, agree to abide by the applicable USATF Bylaws, Operating Regulations, and Competition Rules for my level(s) and category(ies) of membership.

Signature (if an athlete is under age 18, parent or guardian must sign)

Date of Application

- -

Important information for youth members: New or lapsed membership must submit a copy of birth certificate or other ID.

Check here if you do not want your address used as part of a direct mail list.

MEMBERSHIP FEES & REGISTRATION OPTIONS



JOIN ONLINE AT WWW.USATF.ORG/MEMBERSHIP

YOU WILL RECEIVE YOUR MEMBERSHIP # - INSTANTLY!

Have your most recent membership # & password ready as they will be needed for the renewal process

MAIL TO YOUR LOCAL ASSOCIATION

Mail the completed application and appropriate membership fees to your local association.



Mailing addresses and fees can be found at www.usatf.org/associations

Adult Membership (19 yrs & over)
\$ _____ x _____ = \$ _____
Fee # of membership years

Youth Membership (18 yrs & under)
\$ _____ x _____ = \$ _____
Fee # of membership years

CONTRIBUTIONS (TAX DEDUCTIBLE) \$ _____

Please direct my contribution to LDR Youth Masters T & F

RW Associations Programs Unrestricted

TOTAL \$ _____

Please make checks payable to USATF.

WEB03

MLK BLASTERS YOUTH TRACK & FIELD CLUB
Uniform, Warm-up & T-shirt Sizing

Athlete name: _____

Are you ordering a running uniform? ____yes ____no

If yes, please circle size for each piece:

Shirt size YS YM YL AS AM AL AXL

Short Size YS YM YL AS AM AL AXL

One-piece speed suit **(youth only)** AS AM AL AXL

Are you ordering a warm-up? ____yes ____no

If yes, please circle size for each piece:

Jacket size YS YM YL YXL AS AM AL AXL

Pant Size YS YM YL YXL AS AM AL AXL

Are you ordering a T-shirt? ____yes ____no

If yes, please circle size for each piece:

YS YM YL YXL AS AM AL AXL

Are you ordering a Spike bag? ____yes ____no (additional fee= \$15)

Parent/Guardian Signature : _____ Date: _____