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#### CADILLAC AREA YMCA

### **Team Sports**





#### **POLICY**

Participation in activities sponsored by the Cadillac Area YMCA is a privilege and not a right. Any participants in activities related to the Cadillac Area YMCA, at any level of participation, are expected to conduct themselves in a way that makes them a credit to and reflects well on the Cadillac Area YMCA and our community. The purpose of this Code of Conduct is to encourage the responsible behavior of participants in meeting this goal.

#### SCOPE OF COVERAGE

This Code of Conduct is to be applied to the behavior of any members of the Cadillac Area YMCA Team Sports, including players, parents (including stepparents, foster parents, legal guardians, or guardians) coaches and Board members. This Code of Conduct is effective at any Cadillac Area YMCA function, wherever that function may take place.

#### CODE

The following actions are specific examples of prohibited conduct and their possible consequences/sanctions. This list is meant to be descriptive and not exhaustive. Prohibited conduct and possible consequences/sanctions shall include but shall not be limited the following:

- -Examples of conduct generally resulting in sanctions such as verbal and/or written reprimands:
  - Verbal abuse of players, coaches, parents, referees, or officials.
  - Use of inappropriate or foul language by players, coaches, or parents.
  - Minor violation of team rules.

-Examples of conduct generally resulting in sanctions, such as suspensions from games, practices, meetings, and any other Cadillac Area YMCA functions, for periods possibly ranging from 1 game to 2 weeks:

- Violation of team rules or abuse of facilities and/or equipment.
- Misrepresentation of the Cadillac Area YMCA.
- Insubordination to the reasonable requests of coaches or Cadillac Area YMCA.
- Failure, without reasonable excuse, to attend practices and games as directed by the coaching staff.
- Behavior which is generally regarded as unbecoming an athlete and which undermines the values associated with good sportsmanship, including any displays of intent to injure or fighting.

-Examples of conduct generally resulting in sanctions, such as suspensions from games, practices, meetings, and any other Cadillac Area YMCA functions, for periods of time possibly ranging from 2 weeks to permanent:

- Misappropriation of funds.
- Use/sale/possession of illegal drugs.
- Use of alcohol by adults either immediately before or during Cadillac Area YMCA events or use of any alcohol when and where prohibited by law.
- Possession of any weapons at Cadillac Area YMCA events.
- Theft or possession of stolen goods, including athletic equipment provided by Cadillac Area YMCA

#### **VIOLATIONS**

Any violations of the Cadillac Area YMCA Team Sports Code of Conduct will be referred to the Cadillac Area YMCA Program Director. The Program Director will investigate the nature and seriousness of the offense along with consultation with the Coaches Committee.

Any offense sanction may be appealed to the Cadillac Area YMCA Program Committee. Any appeal must be filed in writing within (5) days after imposition of the sanction.

The undersigned have received and reviewed the Cadillac Area YMCA Team Sports Code of Conduct. The undersigned accept the terms and understand the consequences of the Cadillac Area YMCA Team Sports Code of Conduct.

(Player Name – Print)		(Parent/Guardian Name – Print)	
(Player – Signature)	(Date)	(Parent/Guardian – Signature)	(Date)





## Cadillac Area YMCA Consent for Medical Treatment

This is to certify that on this date, I $\_$	, as parent or guardian of	
(	athlete participant), or for myself as an adult participant, give m	
consent to the Cadillac Area YMCA	and its representatives to obtain medical care from any licensed	
physician, hospital, or clinic for the a	bove mentioned participant, for any injury that could arise from	
participation in Cadillac Area YMCA	programs.	
If said participant is covered by any i	nsurance company, please complete the following:	
Name of Insurance Company:		
Insurance Company Address:		
Policy Number:		
Signed:		
(parent/guardian or adult participant)		
Participants Name:	Date of Birth:/	
Home Address:		
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