

# **ABERDEEN BASEBALL CAMP**

It's time to get ready for BASEBALL SEASON! The Aberdeen Parks & Recreation Department is teaming up with Aberdeen Baseball Coach **Shon Schreiber** to bring boys and girls 8-14 years old a hitting & defense camp on Saturday's in February and March. Coach Schreiber has been conducting baseball camps for Grays Harbor youth baseball players for more than 10 years. His knowledge, organization, and positive interaction with the kids bring players back year after year.

\*Participants must fit into the age group, NO EXCEPTIONS!!



**February 6<sup>th</sup>, 20<sup>th</sup>, 27<sup>th</sup>, & March 5<sup>th</sup> (No camp on 2/13)**

**10:00 to 12:00 each day**

**Cost is \$50**

**Bishop Batting Building at Pioneer Park**

Each player will receive instruction in small groups and will receive several hitting & defense reps, bring your own glove, bat and helmet. Wear tennis shoes for the building, but bring cleats in case we are able to get outside. Note that only water is allowed in the building for players and visitors, no food, seeds, gatorade, etc. The price includes a camp t-shirt. For more information, please call the Aberdeen Parks & Recreation Department at 537-3230 or email at [dfarmer@aberdeenwa.gov](mailto:dfarmer@aberdeenwa.gov).

**Visit our website at [www.aberdeenwa.gov](http://www.aberdeenwa.gov)  
Like 'Aberdeen Parks & Recreation' on Facebook**

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**Detach and Mail to: Aberdeen Parks & Recreation; 200 East Market; Aberdeen, WA 98520**  
**\*Make checks payable to the City of Aberdeen**

**Name** \_\_\_\_\_ **Phone** \_\_\_\_\_ **Age** \_\_\_\_\_ **Gender** **M** or **F**

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Shirt Size** (Youth): Small \_\_\_\_\_ Med \_\_\_\_\_ Large \_\_\_\_\_  
(Adult): Small \_\_\_\_\_ Med \_\_\_\_\_ Large \_\_\_\_\_ X-Large \_\_\_\_\_

**Hitting & Defense Camp (\$50)** \_\_\_\_\_

## **REGISTRATION AND RECEIPT FORM/WAIVER FOR PARTICIPATION**

I hereby, for myself, my organization, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against the Aberdeen/Hoquiam Departments of Parks and Recreation, the Grays Harbor Community College, the Aberdeen/Hoquiam School District, or any organization in whose building or grounds this activity is being held, and any instructors or person of these departments for injuries received in participating in any activity sponsored by the Aberdeen/Hoquiam Departments of Parks and Recreation.

\_\_\_\_\_  
PARENT OR GUARDIAN SIGNATURE

**Aberdeen Baseball Camp, 2016**

**\*\*ALL PARENTS/GUARDIANS AND PARTICIPANTS MUST READ, UNDERSTAND, AND SIGN THE CONCUSSION INFORMATION SHEET ON THE BACK!**

The City of Aberdeen does not discriminate against or exclude anyone from participation. Please contact the Parks & Recreation Department at 537-3230 (for TDD, dial 533-6668) at least five working days in advance for ADA accommodation requests.

# City of Aberdeen, Parks & Recreation Department Concussion Information Sheet



## Adapted from the CDC and the 3rd International Conference on Concussion in Sport Document created 6/15/2009

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

### Symptoms may include one or more of the following:

|  |                                     |                                  |
|--|-------------------------------------|----------------------------------|
| Headaches  | “Pressure in head”                  | Nausea or vomiting               |
| Neck pain  | Balance problems or dizziness       | Blurred, double, or fuzzy vision |
| Sensitivity to light or noise                            | Feeling sluggish or slowed down     | Feeling foggy or groggy          |
| Drowsiness   | Change in sleep patterns            | Amnesia                          |
| “Don’t feel right”                                       | Fatigue or low energy               | Sadness                          |
| Nervousness or anxiety                                   | Irritability                        | More emotional                   |
| Confusion  | Repeating the same question/comment |                                  |
| Concentration or memory problems (forgetting game plays) |                                     |                                  |

### Signs observed by teammates, parents and coaches include:

|                                  |   |   |
|----------------------------------|---|---|
| Appears dazed                    | Vacant facial expression                      | Confused about assignment                 |
| Forgets plays                    | Is unsure of game, score, or opponent         | Moves clumsily or displays incoordination |
| Answers questions slowly         | Slurred speech                                | Shows behavior or personality changes     |
| Can’t recall events prior to hit | Can’t recall events after hit                 | Seizures or convulsions                   |
| Loses consciousness              | Any change in typical behavior or personality |   |

### What can happen if my child keeps on playing with a concussion or returns to soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete’s safety.

### If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new “Zackery Lystedt Law” in Washington now requires the consistent and uniform implementation of long and well-established return to play concussion guidelines that have been recommended for several years: “a youth athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time” and “...may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider”. **You should also inform your child’s coach if you think that your child may have a concussion.** Remember its better to miss one game than miss the whole season. And when in doubt, the athlete sits out. For current and up-to-date information on concussions you can go to: <http://www.cdc.gov/ConcussionInYouthSports/>

\_\_\_\_\_  
Student-athlete Name Printed

\_\_\_\_\_  
Student-athlete Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Legal Guardian Printed

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date