



LEAGUE INTEREST APPLICATION

Season:

Schedule Requests Due By:

Priority Given To:

Winter (December 1 to February 28/29)

Spring/Summer (March 1 to July 31)

Fall (August 1 to November 30)

October 1

January 1

May 1

None

Baseball, Cricket, Fastpitch, Lacrosse

Football, Soccer

League Name: _____

President: _____ **Email:** _____ **Phone:** _____

Scheduler: _____ **Email:** _____ **Phone:** _____

Treasurer: _____ **Email:** _____ **Phone:** _____

Sport: *check all that apply*

☐ Baseball

• Basepath: ☐ 60' ☐ 65'

☐ 70' ☐ 90'

☐ Softball

• Basepath: ☐ 60' ☐ 65'

☐ Soccer ☐ Lacrosse

☐ Cricket ☐ Football

League Demographics: *REQUIRED*

• Total # athletes: _____

• # Sammamish resident athletes: _____

Primary Field Users: *REQUIRED*

☐ Youth ☐ Males

☐ Adults ☐ Females

Artificial Field Preferences: *check all that apply*

Eastlake Community Artificial Fields

☐ Monday ☐ Thursday ☐ 6:00—7:30 pm

☐ Tuesday ☐ Friday ☐ 7:30—9:00 pm

☐ Wednesday

Weekend availability:

☐ Saturday ☐ Sunday

☐ 9:00—11:00 am ☐ 3:00—5:00 pm

☐ 11:00—1:00 pm ☐ 5:00—7:00 pm

☐ 1:00—3:00 pm ☐ 7:00—9:00 pm

• Preferred Start Date: _____

• Preferred End Date: _____

Natural Field Preferences: *check all that apply*

☐ Beaver Lake Natural Fields

☐ East Sammamish Natural Fields

☐ Klahanie Natural Field

☐ Pine Lake Natural Field

☐ Monday

☐ Morning

☐ Tuesday

☐ Early Afternoon

☐ Wednesday

☐ Late Afternoon

☐ Thursday

☐ Evening

☐ Friday

☐ Saturday

• Preferred Start Date: _____

☐ Sunday

• Preferred End Date: _____

LWSD Natural Field Preferences: *check all that apply*

- ☐ Blackwell Baseball Field
- ☐ Blackwell Soccer Field
- ☐ Carson Soccer Field

Inglewood Baseball Field
Inglewood Soccer Field
Inglewood Softball Field

**Inglewood fields
not available until
Fall of 2024**

- ☐ Mead Soccer Field
- ☐ McAuliffe Baseball Field
- ☐ McAuliffe Soccer Field Smith
- ☐ Soccer Field

- ☐ Monday
- ☐ Tuesday
- ☐ Wednesday
- ☐ Thursday
- ☐ Friday
- ☐ Saturday
- ☐ Sunday
- ☐ Morning
- ☐ Early Afternoon
- ☐ Late Afternoon
- ☐ Evening

Preferred Start Date: _____

Preferred End Date: _____

City of Sammamish Fees:

Artificial (Eastlake Community Fields)

- Youth \$65/hr
- Adults \$95/hr

Lights \$25/hr (only charged after dusk)

Natural (Beaver Lake, East Sammamish, Pine Lake, & Klahanie)

- Youth \$20/hr
- Adults \$35/hr

Field Prep \$10 (Grooming & Watering)

Game Prep \$40 (Grooming, Watering & Lining)

When you submit your application, please send separate form in excel or word with a detailed breakdown of your wishlist of dates and times. Keep in the mind, the more information we have the easier for us to form schedules for all the leagues.

Please initial the following items to acknowledge that you have read them and agree to each item.

- _____ I am aware that the City has a right to close a field or cancel a rental anytime due to emergency, severe weather, vandalism, poor playing conditions, situations that may result in field damage or personal injury, or for any other reason.
- _____ I am aware that an adult league designated representative must be on site for the entire duration of the rental.
- _____ I am aware that league may not sub-lease field rental times to other leagues or individuals.
- _____ I am aware that if a team in this league takes the fields before their rental time or leaves any equipment out on the fields after their rental time that the City may be forced to take measures that will insure that the fields will be used correctly in the future.
- _____ I am aware that payment for 50% of all confirmed priority scheduling rental time is due before the fields open to the general public and that if payment is not made, the field bookings will be cancelled. The remaining rental fee is due by the 10th of the month following the month of use and that a late fee of 10% will be assessed by the City if the rental fees are not received when due.
- _____ I am aware that rentals taking place at lighted facilities on or after dusk require the use of lights at the expense of the league.
- _____ I am aware that there is no fee for bookings turned back during the priority scheduling process. I am also aware that once the priority schedule process is complete there is a 20% cancellation fee for all bookings, a 50% cancellation fee for bookings cancelled with less than a month notice, and that no refund will be assessed for bookings cancelled with less than two weeks' notice.
- _____ I am aware that proof of insurance is required naming the City of Sammamish as additional insured.
- _____ I am aware that portable fencing and storage of equipment are not available without pre-approval. Fees will be assessed for use without approval.
- _____ I am aware that the sale of goods and distribution of publicity materials is not allowed in any City of Sammamish park areas, except by concession contract or special use permit issued by the Parks and Recreation Department.

The City prohibits discrimination on basis of sex. Fields are allocated and scheduled in a manner that provides equal access to all community athletic programs regardless of sex. The City will not rent fields to any groups that discriminate against a person based on sex.

The individual or organization using City of Sammamish facilities agrees to protect, defend, indemnify, and save harmless the City, their officers, employees, and agents from any and all costs, claims, judgments, and awards for damages arising out of or in any way resulting from the use of City facilities. In the event the City incurs any fees, expenses, and/or costs, including attorney fees, to enforce the provisions of this article, all such fees, expenses, and costs shall be recoverable from the organization.

I, the undersigned, hereby certify that I am an individual hosting an event or the authorized and responsible representative of the petitioning organization, that the above statements are true to the best of my knowledge, and I have read all the regulations, policies, and facility use requirements governing uses of City facilities, which are enclosed with this permit. The undersigned agrees to accept any and all legal liability for damages to any or all parts of the facility and/or equipment covered in this permit and/or injuries incurred by any of all of the guest and/or group members.

Name

Signature

Date



**City of Sammamish Parks, Recreation and Facilities
Department Youth Sports
Zackery Lystedt Law – Concussion / Head Injury and
Sudden Cardiac Arrest Policies
RCW 4.24.660 and RCW 28A.600.190**

Issued: 10/2010
Revised: 03/2014

A 2009 act requiring the adoption of policies for the management of concussion and head injury in youth sports; amending the Revised Code of Washington 4.24.660 and adding section RCW 28A.600.190 "Zackery Lystedt Law" states, in part, the following:

Each school district's board of directors shall work in concert with the Washington Interscholastic Activities Association (WIAA) to develop the guidelines and other pertinent information and forms to inform and educate coaches, youth athletes, and their parent(s)/legal guardian(s) of the nature and risk of concussion and head injury including continuing to play after concussion or head injury. On a yearly basis, a concussion and head injury information sheet shall be signed and returned by the youth athlete and the athlete's parent/legal guardian prior to the youth athlete's initiating practice or competition.

Although the law generally directs these instructions to school districts and the Washington Interscholastic Activities Association (WIAA), it is best practice that private, nonprofit youth sports associations wanting to use publicly owned playfields also comply with the law. The City of Sammamish Parks, Recreation and Facilities Department therefor requires all youth sports activities using City of Sammamish property or facilities and/or Lake Washington School District property managed by the City to comply with this law.

After reading this information on "Youth Sports – Concussion / Head Injury Management Information Sheet" and the "Sudden Cardiac Arrest Awareness Information Sheet," please sign the "Youth Athlete/Parent/Legal Guardian Concussion and Sudden Cardiac Arrest Awareness Compliance Statement." The signed Compliance Statement must be returned by the youth sports association to the City of Sammamish, Recreation and Facilities Department and is good only for the current sports season.

Attachments:

- Youth Sports – Concussion / Head Injury Management Information Sheet
- Youth Sports – Youth/Parent/Guardian Youth Sports Sudden Cardiac Arrest Awareness Information Sheet
- League Compliance Statement for RCW 4.24.660, RCW 28A.600.190 and RCW 28A.600.195 Youth Athlete/Parent/Legal Guardian Concussion and Sudden Cardiac Arrest Awareness

Youth Sports – Concussion / Head Injury Management

(Zackery Lystedt Law)

Information Sheet

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
- Concentration or memory problems (forgetting game plays)
- Repeating the same question/comment

Signs observed by teammates, parents- legal guardians, and coaches include:

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays lack of coordination
- 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
- Any change in typical behavior or personality
- Loses consciousness

What can happen if my child keeps on playing with a concussion or returns too 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 severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often underreport symptoms of injuries, and concussions are no different. As a result, education of administrators, coaches, parents/legal guardians, and athletes is the key for youth athletes' safety.

If you think your child has suffered a concussion:

Any athlete 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 "Zackery Lystedt Law" in Washington 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." "[He or she] may not return to play until the athlete is evaluated by a licensed health-care provider trained in the evaluation and management of concussions and has 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. It is better to miss one game than miss the whole season so when in doubt, the athlete should sit out.

RETURN TO PARTICIPATION PROTOCOL

If the youth athlete has been diagnosed with a concussion he/she MUST follow a progressive return to participation protocol (under the supervision of an approved health care provider) before full participation is authorized.

The return to play protocol may not begin until the athlete is no longer showing signs or symptoms of concussion. Once symptom free, the athlete may begin a progressive return to play. This progression begins with light aerobic exercise only to increase the heart rate (5-10 minutes of light jog or exercise bike) and progresses each day as long as the athlete remains symptom free. If at any time symptoms return, the athlete is removed from participation.

Additional information regarding concussion management is available from the Centers for Disease Control and Prevention (CDC) at: <http://www.cdc.gov/ConcussionInYouthSports/>.

**Youth/Parent/Guardian
Youth Sports Sudden Cardiac Arrest Awareness Information
Sheet**

Issued: 10/2015

What is sudden cardiac arrest? Sudden Cardiac Arrest (SCA) is the sudden onset of an abnormal and lethal heart rhythm, causing the heart to stop beating and the individual to collapse. SCA is the leading cause of death in the U.S. afflicting over 300,000 individuals per year.

SCA is also the leading cause of sudden death in young athletes during sports.

What causes sudden cardiac arrest? SCA in young athletes is usually caused by a structural or electrical disorder of the heart. Many of these conditions are inherited (genetic) and can develop as an adolescent or young adult. SCA is more likely during exercise or physical activity, placing student-athletes with undiagnosed heart conditions at greater risk. SCA also can occur from a direct blow to the chest by a firm projectile (baseball, softball, lacrosse ball, or hockey puck) or by chest contact from another player (called "commotio cordis").

While a heart condition may have no warning signs, some young athletes may have symptoms but neglect to tell an adult. If any of the following symptoms are present, a cardiac evaluation by a physician is recommended:

- Passing out during exercise
- Chest pain with exercise
- Excessive shortness of breath with exercise
- Palpitations (heart racing for no reason)
- Unexplained seizures
- A family member with early onset heart disease or sudden death from a heart condition before the age of 40

How to prevent and treat sudden cardiac arrest? Some heart conditions at risk for SCA can be detected by a thorough heart screening evaluation. However, all schools and teams should be prepared to respond to a cardiac emergency. Young athletes who suffer SCA are collapsed and unresponsive and may appear to have brief seizure-like activity or abnormal breathing (gasping). SCA can be effectively treated by immediate recognition, prompt CPR, and quick access to a defibrillator (AED). AEDs are safe, portable devices that read and analyze the heart rhythm and provide an electric shock (if necessary) to restore a normal heart rhythm.

Remember, to save a life: recognize SCA, call 9-1-1, begin CPR, and use an AED as soon as possible!



City of Sammamish Parks, Recreation and Facilities Department
League Compliance Statement for
RCW 4.24.660, RCW 28A.600.190 and RCW 28A.600.195
Youth Athlete/Parent/Legal Guardian Concussion and Sudden Cardiac Arrest Awareness

_____(organization name) requests use of the following facilities for the following dates and purposes:

_____, a private non-profit youth sports group, verifies receipt of the attached Zackery Lystedt Law Information Sheet and attached Sudden Cardiac Arrest Information Sheet, and verifies all coaches, athletes and their parents/guardians have complied with mandated policies for the management of concussions, head injuries and sudden cardiac arrest awareness as prescribed by RCW 4.24.660, RCW 28A.600.190 and RCW 28A.600.195.

_____(initial here to confirm) The (Youth Sports Group) required insurance shall be maintained as follows: **See Attachment**

General Liability insurance shall be at least as broad as Insurance Services Office (ISO) occurrence form CG 00 01 covering premises, operations, products-completed operations contractual liability and coverage for participant liability. The City of Sammamish (and Lake Washington School District #414, if applicable) shall be named as an additional insured(s) on (Youth Sports Group) General Liability insurance policy using ISO Additional Insured-Managers or Lessors of Premises Form CG 20 11 or an endorsement providing at least as broad coverage. The General Liability insurance shall be written with limits no less than \$1,000,000 each occurrence, \$2,000,000 general aggregate. Proof of insurance and additional insured endorsement are attached.

The (Youth Sports Group) shall defend, indemnify and hold harmless the City of Sammamish (and Lake Washington School District #414, if applicable), its officers, officials, employees and volunteers from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of the use of Premises or from any activity, work or thing done, permitted, or suffered by User in or about the premises, except only such injury or damage as shall have been occasioned by the sole negligence of the City of Sammamish (or Lake Washington School District #414, if applicable).

Signed: _____

Print Name and Representative Title: _____

Representative of League Listed Within _____

Date: _____

Note: Access to facilities is not granted until all requirements of the application process are complete and until approved and permitted by the City of Sammamish.



**City of Sammamish Parks, Recreation and Facilities Department
League Compliance Statement for
Gender Equity Act Compliance Agreement**

In 2009, Washington State House of Representative Bill ESSB 5967 (the Gender Equity Bill) was passed. The City of Sammamish Parks, Recreation and Facilities Department has a vested interest in ensuring both City programs are operated with this law in practice and organizations receiving permitted field use from the City of Sammamish (for City of Sammamish athletic fields or Lake Washington School District athletic fields) are operating with the same law in practice as well.

As an element of the Field Use application process, all league Field Use Applicants are required to provide a statement of compliance regarding this law.

The Gender Equity Act, House of Representatives ESSB 5967

The Washington Constitution and statutory law prohibit discrimination based on sex. In 1972, Washington voters approved the Equal Rights Amendment to the Washington Constitution. The Equal Rights Amendment provides that "equality of rights and responsibility under the law shall not be abridged on account of sex. "

Cities, towns, counties and districts are prohibited from discriminating against any person on the basis of sex in the operation, conduct, or administration of community athletics programs for youth or adults. District means a metropolitan park district, park and recreation service area, or park and recreation district. A third party, receiving a lease or permit for a community athletics program on a City of Sammamish site or a Lake Washington School District site the City manages allocations of, also may not discriminate against any person on the basis of sex in the operation, conduct, or administration of the program.

_____(organization name) requests use of the following facilities for the following dates and purposes: **See Attachment**

Requirement

To complete the Athletic Field Permitting process, the City of Sammamish Parks, Recreation and Facilities Department requires league presidents, or an approved representative, attest to the following regarding the Gender Equity Act:

_____, a private non-profit sports group, verifies receipt of the attached Gender Equity Act, ESSB 5967

I confirm our league does not discriminate against any person (or group) on the basis of gender in the operation, conduct, or administration of our league's program(s). I confirm our league is operated in a manner that promotes equal opportunities.

Signed: _____

Print Name and Representative Title: _____

Representative of League Listed Within _____

Date: _____

Note: Access to facilities is not granted until all requirements of the application process are complete and until approved and permitted by the City of Sammamish.