

ATTENTION COACHES!

MUST READ

REGISTERING A HIGH SCHOOL BASKETBALL TEAM MEANS THAT YOU AGREE TO THE FOLLOWING SCHEDULE:

Saturdays

Game times: 9:00 am-6:00 pm

All Girls League

10th Grade Boys

12th Grade Boys

Sundays

Game times: 12:00 noon- 6:00 pm

9th Grade Boys

11th Grade Boys

COACHES PACKETS:

All team registration forms and full payment must be in the Montgomery County Department of Recreation **no later than Monday, November 14th 2011**. The following items are required:

Team Registration Form – all pertinent information must be filled out including detailed information for the main contact and a phone number for a 2nd adult from the team. You can also use the form to pay the league fee by credit card. **Fax to 240.777.6818.**

Roster – Please fill out the roster and return it to the sports office with your registration form. Practices times will be given out after your roster and registration forms are received. Additions and or deletions can be made to this roster before the 3rd game.

Individual Player Registration Forms – each player must have a registration form completed and signed by their parent. The registration form must be in the league office before that player can participate in a league game.

Standards for Spectator Behavior – both parents and or guardians must carefully read this information and sign on the bottom of the document. The form must be in the league office before the player can participate in a league game.

Coach's Code of Ethics (C.C.E.) – On last page of the revised league rules you will find the Coach's Code of Ethics. All coaches must read, sign and send the C.C.E. the league office before the first game.

I will keep a list of individuals looking to be placed on a team. Call 240-777-4984 if you need extra players



DEPARTMENT OF RECREATION

Isiah Leggett
County Executive

Gabriel Albornoz
Director

October 1, 2011

Dear Coach:

The Montgomery County Department of Recreation's 9th-12th grade High School Basketball season is again only a few weeks away. We hope you are still interested in coaching a team in our league. If so, please return the enclosed roster, registration form, Spectator's Guidelines, and entry fees to the Montgomery County Department of Recreation in order to confirm a team in the league this winter. Please remember, an adult aged 21 or over must be present at all league games and practices.

All coaches will be required to be fingerprinted for the 2012 season of basketball. If you have been previously fingerprinted with Montgomery County Recreation Department prior to this season you will not need to be fingerprinted again once information has been verified. Fingerprints from other agencies like MCPS, Government and other local companies **do not qualify**. Please call Rosemarie Mantua at 240-777-6851 to set up your appointment as soon as possible. You will receive your practice time once it is confirmed that you have made your appointment for fingerprinting or have been fingerprinted. There is no fee for fingerprinting.

Please mail or email a completed copy of the **team roster only** to: Attn: Portia Scott 4010 Randolph Road Silver Spring, MD 20902 or Portia.Scott@montgomerycountymd.gov All rosters, registration, and payments must be submitted by the registration deadline date in order to obtain early assignment of practice time and location. Any part of the registration process not included will delay practice assignments. Assignments are made on a first-come, first-served basis. If payments are by credit card, registrations may be faxed to 240-777-6818. **The deadline for team registration is Friday, November 12, 2011.**

T-shirt/Schedule pick up will be held on December 21 from 3-7pm at MCRD Office 4010 Randolph Road Silver Spring, MD 20902, Room #300. Shirt colors are based on first come, first serve basis on Dec. 21st only. If you are unable to pick up your shirt on this day a shirt color will be assigned to your team. Practices will begin the week of December 1, 2011; games begin January 7, 2012.

Thank you for supporting the Department of Recreation's Youth Sports program. It's people like you who make this program a success for our County's youth. If you have any questions, please contact me at 240-777-4984 or Portia.Scott@montgomerycountymd.gov. Here's to another great and fun season!

Sincerely,

Portia Scott
Recreation Specialist

Youth Sports

October 2011

To: Recreation High School Basketball Coaches
From: Portia Scott, League Director
Subject: 2011-2012 League & Registration Information

Leagues & registration course numbers:

BOYS

9th Grade Boys / Intermediate Course # 310345
9th Grade Boys Advanced /Course #310347
10th Grade Boys Intermediate /Course #31049
10th Grade Boys Advanced /Course #310351
11th Grade Boys/ Intermediate Course # 310353
11th Grade Boys Advanced /Course # 310355
12th Grade Boys/ Intermediate Course # 310357
12th Grade Boys Advanced /Course #310359

GIRLS

9th Grade Girls Intermediate / Course # 310344
9th Grade Girls Advanced /Course # 310346
10th Grade Girls Intermediate Course # 310348
10th Grade Girls Advanced /Course # 310350
11th Grade Girls Intermediate/ Course/# 310352
11th Grade Girls Advanced /Course # 310354
12th Grade Girls Intermediate Course /# 310356
12th Grade Girls Advanced /Course # 310358

FEES

\$800 per team / out of county fee \$920 (50% of roster lives out of county)

The fee includes 2 IAABO officials for 8 games, practice facility, games shirts, staff, game day facility, awards and game equipment.

Each League will have an **intermediate** and **advanced** division. Teams must play in the grade level of their oldest player. Please indicate on your registration form the grade level of your team, boys or girls, intermediate or advanced. The league director reserves the right to place a team in the appropriate division based on last year's record.

Intermediate Level – Finished below 500 the prior season – one or less select player on roster.

Advanced Level – Finished above 500 the prior season – no more than 3 select players on roster

GAME DAYS

Saturdays

Game times range

From 9:00 am-6:00 pm

All Girls Leagues

10th and 12th Grade Boys

Sundays

Game times range

From 12:00 noon- 6:00 pm

9th Grade Boys

11th Grade Boys

SCHEDULE CONSIDERATIONS

All schedule considerations must be submitted in writing to the Recreation Department by November 23, 2011. **I make no guarantee that I will be able to accommodate all requests but, I will try my best to do so.** Considerations will not be accepted after this date.

REGISTRATION

All team registration forms and full payment must be in the Montgomery County Department of Recreation **no later than Monday, November 14th 2011.** The following items are required:

Team Registration Form – **all pertinent information must be filled out** including detailed information for the main contact and a phone number for a 2nd adult from the team. You can also use the form to pay the league fee by credit card. **Fax to 240.777.6818.**

- A. Roster – Please fill out the roster and return it to the sports office with your registration form. Practices times will be given out after your roster and registration forms are received. Additions and or deletions can be made to this roster before the 3rd game.
- B. Individual Player Registration Forms – each player must have a registration form completed and signed by their parent. The registration form must be in the league office before that player can participate in a league game.
- C. Standards for Spectator Behavior – both parents and or guardians must carefully read this information and sign on the bottom of the document. The form must be in the league office before the player can participate in a league game.

I will keep a list of individuals looking to be placed on a team. Call 240-777-4984 if you need extra players

Practice Time

Once I receive your registration form with full payment and team roster, I will contact the coach to arrange a time. Space will be given out on a first come first serve basis. Practice begins the week of December 1st.

UNIFORMS

The recreation department will provide 12 shirts for each team.

LEAGUE RULES AND ELIGIBILITY

Teams that play in the advanced division may have no more than 3 select players on their roster.

**A minimum of 8 players are required to create a team with a maximum of 12*
“select player”**

- An athlete that plays on a team with tryouts – i.e. AAU, school JV or varsity team.

No jewelry of any kind may be worn during the game.*

Important Dates and Information

H.S. Winter Basketball 2011-2012

Friday, November 11, 2011

Registration Ends

Thursday, December 1, 2011

Weekday practices begin

Sunday, December 10, 2011

Free Coaching Clinic @ Mid County Community Center
2004 Queensgaud Road, Silver Spring 20906
Noon – 3 pm

Wednesday, December 21, 2011

Shirt & Schedule pickup from MCRD Office Room #300
4010 Randolph Road Silver Spring, MD 20902
3-7 pm

December 23 – January 2, 2011

No practices during school holidays. Practice will resume the week of 1/3/12
Many schools will have holiday programs and may have additional skip days during the month of
December and January.

January 7 & 8, 2012

Games Begin!

(All dates and time subject to change)

Call or email with any questions:

Portia Scott
240-777-4984

Portia.Scott@montgomerycountymd.gov

MEMORANDUM

October 1, 2011

TO: Managers, Coaches Winter Youth Basketball

FROM: Portia Scott
League Director

On behalf of the Montgomery County Department of Recreation, I would like to thank you for your participation this year in the basketball program.

Please note the following important league information:

Weather Cancellations - The inclement weather number for MCRD programs is 240-777-6889. This number is updated by 7:15 a.m. on weekends regarding the status of practices and games.

School Lockouts - If your team is experiencing a lock-out from a public school, call the Community Use of Public Facilities at 240-777-2727. This is a recording that is monitored 24 hours a day, 7 days a week and you should receive a return call within 15 minutes. They will attempt to rectify the problem by getting a staff person to open the facility as soon as possible. Should a lock out occur, please notify our office the following Monday.

Please contact me at 240-777-4984 if you have any additional questions concerning the high school basketball program.

Montgomery County, Maryland

GENERAL VOLUNTEER REGISTRATION FORM

Completion of this form is required by all volunteers. The Montgomery County Self-Insurance Program provides medical benefits for volunteers injured while performing duties on behalf of the County as directed by the supervisor, equal to medical benefits as required to be provided under the Workers' Compensation Law of the State of Maryland. The Montgomery County Self-Insurance Program also provides General Liability Coverage to volunteers. Details of coverage may be discussed with the Division of Risk Management. Please complete this form as accurately as possible. Be assured that this information is confidential and for use only by the Division of Risk Management.

Please Type or Print Clearly

Name: _____ *AGE _____

Street Address: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Driver's License Number: _____ Expiration Date: _____

Volunteer's Area of Specialty: _____

I hereby state that the above information is correct as of this date.

Volunteer's Signature: _____ Date: _____

*VOLUNTEERS UNDER AGE 18 MUST HAVE THE FOLLOWING SECTION COMPLETED BY A PARENT &/OR LEGAL GUARDIAN.

I am the parent and/or legal guardian for _____, a minor. I hereby give my permission for him/her to perform volunteer services for Montgomery County Department of RECREATION.

Parent/Legal Guardian Signature: _____ Date: _____

This part to be completed by the Volunteer's County Govt. Supervisor

County Supervisor's Signature: _____ Date: _____

Print Last Name of County Supervisor: SCOTT Supv. Phone No.: 240.777.4984

County Department: RECREATION and Division: YOUTH SPORTS (where Volunteer will work)

(Please note, the supervisor information must be completed BEFORE this form is sent to the Division of Risk Management.)

Return completed form with ORIGINAL SIGNATURES to: Division of Risk Management/Insurance
101 Monroe Street, 15th Floor
Rockville, Maryland 20850 240-777-8920

If you will be driving on behalf of Montgomery County, you must also complete a Driver Volunteer Registration form.

High School Game Schedule Special Request

Coach Name: _____

Coach Phone #: _____

Grade: _____

Boys or Girls (please circle one)

I coach more than one team and need schedule considerations: yes or no (please circle one)

Date of Game/Time of Conflict: _____

Explanation of Conflict/Request:

*This only a request for a scheduling request consideration. This is not a guarantee that I will receive this special request. This form must be turned in no later than November 23, 2011.

TEAM ROSTER – High School Basketball – Winter 2011-2012

GRADE: _____ **Boys**_____ **Girls** _____

LEVEL OF PLAY: **Intermediate**____ **Advanced** _____

COACH'S NAME _____ **TEAM NAME** _____

ADDRESS _____ **CITY** _____ **ZIP:** _____

PHONE: H: _____ **W:** _____ **FAX #:** _____ **EMAIL:** _____

The participant assumes all risks associated with participation in the program; the County assumes no liability for injury or damages arising from participation in the program. Due to the strenuous nature of some activities, the County encourages each participant to consult his or her physician concerning fitness to participate in the program. The participant consents to emergency treatment. The participant also consents to the County's use if any photographs taken or video tapes made of the program. If the participant is a minor, the parent or guardian approves his or her participation in the program.

Name (please print legibly)	STREET ADDRESS	ZIP	GRAD	HOME PHONE	SCHOOL
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

Registration Form

Check here if new address/phone/email. **Please print.** This form may be duplicated.

PAYER/SPONSOR: Name _____ Signature on check _____
 Address _____ City _____ State _____ Zip _____
 Home Phone () _____ Work Phone () _____ Cell Phone () _____

MANAGER: Name _____ Email _____
 Address _____ City _____ State _____ Zip _____
 Home Phone () _____ Work Phone () _____ Cell Phone () _____

ASSIST. MANAGER: Name _____ Email _____
 Address _____ City _____ State _____ Zip _____
 Home Phone () _____ Work Phone () _____ Cell Phone () _____

Team Name	League	Category	Division	Day	Level	Course #	Fees*

Team Name/Record: _____

Special Request: _____

Amount Due: \$

Check or Money Order payable to MCRD, Attn: Sports, 4010 Randolph Road, Silver Spring, MD 20902.

Master Card Visa Card No. _____ Expiration Date _____

CARDHOLDER: Name (print) _____ Signature _____ Date _____

If paying by credit card, you may fax your registration form to 240-777-6915. If you need help completing this form, please call 240-777-6880.

***Registrations will not be accepted without payment.**

The participant assumes all risks associated with participation in the program; the County assumes no liability for injury or damages arising from participation in the program. Due to the strenuous nature of some activities, the County encourages each participant to consult his or her physician concerning fitness to participate in the program. The participant consents to emergency treatment. The participant also consents to the County's use of any photographs taken or video tapes made of the program. If the participant is a minor, the parent or guardian approves his or her participation in the program. Neither the instructor nor any of the staff are responsible for children prior to or after the scheduled program. I agree to abide by all department rules and regulations.

Participant or Parent/Guardian Signature _____ Date _____

Montgomery County Department of Recreation-Sports Team
4010 Randolph Road
Silver Spring, MD 20902
240/777-6961

Coaches' Code of Ethics

It shall be the duty of each Coach to:

1. Read, sign, and return Coaches' Code of Ethics to the League Director.
2. Comply with the philosophy, policies and procedures of Montgomery County Department of Recreation. Respect all employees and volunteers involved in the program. Remember that each coach is a representative of the Recreation Department.
3. Remember to encourage and compliment players when they show improvement, play with extra effort, or simply need kind words. Do not unduly criticize players in front of spectators or other players. Criticism should be constructive in nature.
4. Not allow a player to enter or re-enter a game or practice if there is any doubt as to the seriousness of an injury.
5. Abide by a doctor's decision in all matters of players health, injuries, and ability to play.
6. Exhibit good sportsmanship by demonstrating at every practice and game respect and positive support for all players, officials, coaches, staff and spectators by refraining from rude or abusive language, actions or gestures.
7. Never use any physical means against spectators, players, officials, or other coaches. Refrain from criticizing any of the above verbally or by gesture. Never allow an emotional reaction to result in a derogatory, violent or inappropriate response.
8. Respect the decisions of officials and other coaches, recognizing that both are often required to make difficult judgment calls. Accept decisions of officials as being fair and performed to the best of their ability.
9. Assist in maintaining a drug, alcohol, and tobacco-free environment by refraining from their use when in the presence of the players.
10. Be responsible for ensuring that players and team spectators are aware of and abide by numbers 7, 8, 9, and 10 above.
11. Remember these are young athletes who are still learning; encourage and compliment any player who demonstrates effort, good sportsmanship or improved play.
12. Demonstrate dignity in winning or losing, recognizing that both offer opportunities for the personal growth of our youth participants.

Coach's Name (please print) _____ Date: _____

Signature: _____ Team Name: _____

League: High School



MONTGOMERY COUNTY
Recreation



HS Basketball-P. Scott
4010 Randolph Road, Silver Spring, MD
20902
240/777-6870 FAX: 240/777-6818
www.montgomerycountymd.gov

Youth Sports Standards for Spectator Behavior

As we strive towards the most positive experience for the youth of Montgomery County, we are committed to the following standards. All spectators should read the following standards and sign below to indicate his/her willingness to abide by them. As parents/guardians of a player, you are responsible for yourself, as well as, all guests and family members who attend the game. In addition, the team's coach will be held accountable for the behavior of his/her team's spectators and will be disciplined accordingly if spectators do not uphold these standards.

ALL SPECTATORS WILL:

1. Comply with the policies and procedures of Montgomery County Recreation Department.
2. Respect all participants, coaches, staff, officials and volunteers at every practice or youth sports event and encourage all children to do the same.
3. Refrain from abusive or inappropriate language or gestures towards officials, volunteers, coaches, staff, and participants. With the exception of a congratulatory handshake or "high five," **never make physical contact** with participants, coaches, staff, officials or volunteers.
4. Accept the decisions of the officials as being fair and performed to the best of their ability. Never go onto the court or playing field, or approach the official scorekeeper, while the game is in progress. Allow the coach to take all questions, rule interpretations or concerns to the appropriate league official.
5. Refrain from giving the children instructions during the game. Allow the coach to guide them.
6. Help ensure the safety of the playing area by reporting any unsafe hazards, removing trash, leaving food and beverages outside the gym or playing area, and refraining from the use of tobacco, alcohol or other drugs at all youth sports events.
7. Encourage and compliment players when they show improvement, play with extra effort, or simply need kind words.
8. Abide by a doctor's decision in all matters of health, injuries and ability to play.
9. Remember that the game is for youth-*not adults*.

Penalty for Non-compliance:

If a spectator is ejected for these or any reason, as dictated by the League Rules, he/she may not attend the next two (2) league games played. When such action is taken, the individual must meet with the League Director prior to returning to any event. *In addition, if the head coach in attendance has been warned by the official(s) about the behavior of a spectator at the game, that coach will also be suspended for at least one (1) game.* When such action is taken, the coach must meet with the League Director prior to returning to any event. If a spectator is ejected a second time or acts out physically towards another individual, he/she will not be allowed to attend any Montgomery County Recreation Department sports activities for at least one (1) year from the date of the incident. When such action is taken, the individual must meet with the League Director prior to returning to any event.

I/We agree to help make youth sports fun and help teach our players good sportsmanship. I/we understand and will abide by the above standards. (Please sign and return this form to your child's coach.)

Name: _____ Date: _____
 Name: _____ Date: _____
 Coach: _____ Team Name: _____

**HIGH SCHOOL BASKETBALL LEAGUE
PLAYER INFORMATION**

Fax: 240.777.6818

Portia Scott
League Director

NAME: _____ SCHOOL: _____

2011-2012 GRADE: _____ AGE: _____ D.O.B _____

ADDRESS: _____
NUMBER CITY STATE ZIP

HOME PHONE: _____ PARENT WORK: _____ CELL: _____

EMERGENCY NAME: _____ PHONE: _____

Coaches Name _____

The participant assumes all risks associated with participation in the program; the County assumes no liability for injury or damages arising from participation in the program. Due to the strenuous nature of some activities, the County encourages each participant to consult his or her physician concerning fitness to participate in the program. The participant consents to emergency treatment. The participant also consents to the County's use of any photographs taken or video tapes made of the program. If the participant is a minor, the parent or guardian approves his or her participation in the program. Neither the instructor nor any of the staff are responsible for children prior to or after the scheduled program. Agree to abide by all department rules and regulations. Fax 240.777.6818

Print Parent's/Guardian's Name: _____

Signature: _____ Date: _____



Please remember we have a free Coach Clinic!

Mid County Community Center
2004 Queensguard Road, Silver Spring 20906

Saturday December 10, 2011
12:00 noon to 3:00 pm