



IOWA BASEBALL CAMP FOR THE DEAF

Johnston Little League • June 24-28, 2023 • 8:15 am - 12:30 pm

June 24-28

Monday through Thursday mornings
8:15 am - 12:30 pm

Johnston Little League

7501 NW 54th Ave, Johnston, IA 50131

June 27 • June 28

Thursday evening • 5:30 pm | First Pitch • 6:38 pm
Friday morning • 9:15 am - 12:30 pm

Principal Park

1 Line Drive, Des Moines, IA 50309

All campers are required to have the following:

- Their own transportation and housing arrangements
- Baseball glove (we will provide baseball equipment, but not gloves)
- Comfortable, athletic shoes (NO metal cleats are allowed, but molded cleats are acceptable. However, cleats aren't required.)
- A great attitude and a smile on the face!



All campers are required to have at least one Responsible Adult accompany and stay with them at Principal Park.

Tickets for family and friends
will be available at discounted rate.

*See the Iowa Cubs page
for more information*

Please complete the following registration pages:

1. Camper Information
2. Waiver Form
3. COVID-19 Waiver Form
4. Camp Safety Rules Form
5. Media Consent Form

Then send all of them by mail, e-mail, or in-person:

**Iowa Baseball Camp For The Deaf
C/O Dylan Heuer, Camp Director
9764 Lincoln Avenue
Clive, Iowa 50325**

Or email them to iowadeafbaseball@gmail.com,
or personally hand it to Dylan Heuer.

Text Dylan at (515) 771-4407 to set up a time and place

Once you have submitted the completed paperwork, please contact us
to let us know that the registration is on its way in the mail.
This would help with the first-come, first-serve basis.

We will be in contact to confirm registration information as needed.

E-mail iowadeafbaseball@gmail.com
Phones (515) 771-4407 (text)
(515) 577-7703 (cell)
Website www.iowadeafbaseball.com
Facebook www.facebook.com/iowabaseballcampdeaf

Iowa Baseball Camp for the Deaf

June 24-28, 2023

Des Moines, Iowa

Camper Information

Camper Last Name		Camper First Name	
Address		City	State/Zip
Phone (Do you prefer to be reached by call or text ? Circle one) Please include area code		Age (on 6/24/2024)	Birthdate
Shirt Size (circle one) Child S M L XL Adult S M L XL	Pant Size (circle one) Child S M L XL Adult S M L XL	School attending (include city and grade)	
E-Mail			
Primary Contact Name & Relationship to Camper		Phone (Do you prefer to be reached by call or text ? Circle one) Please include area code	
Mandatory Secondary/Emergency Contact & Relationship to Camper		Phone (Do you prefer to be reached by call or text ? Circle one) Please include area code	
What baseball experiences has this camper been involved in? This is to help us prepare for the camp to ensure every camper gets the best possible experience they can. We accept campers of ALL levels and skills.			
Are there any special needs the camper has that we should be aware of? If so, are there any accommodations needed for this camper? (Such as dietary restrictions, insect allergies, or medical conditions, etc.)			

All campers are **required** to have the following;

- Your own transportation and housing arrangements
- Baseball glove (we will provide baseball equipment, but not gloves)
- Comfortable, athletic shoes (NO metal cleats are allowed, but molded cleats are acceptable. However, cleats aren't required.)
- A great attitude and a smile on the face!

IOWA BASEBALL CAMP FOR THE DEAF WAIVER FORM

In consideration of participating in sports camp activities, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence, **Iowa Baseball Camp for the Deaf (IBCD), the City of Johnston, and Johnston Little League** and their owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releases"), on behalf of myself and my children, parents, heirs, assigns, personal representatives and estate, and also agree as follows:

1. I acknowledge that I am able to, on my own, participate physically on a baseball field. This includes, but is not limited to running and walking unassisted on unlevelled surfaces of dirt and grass, along with any baseball and physical activities.
2. I acknowledge that participating in sports camp activities involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments or other injuries as a result of falls or contact with other participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water, medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
3. I acknowledge that by participating in sports camp activities I increase my risk of exposure to and illness from infectious diseases including but not limited to COVID-19, MRSA, and influenza. I acknowledge the contagious nature of these communicable diseases, and further acknowledge that no guarantee exists regarding whether or not I may contract a communicable disease. I understand that the risk of becoming exposed to and or infected by a communicable disease may result from the actions, omissions, or negligence of myself and others, including but not limited to staff, volunteers, and participants of the event.
4. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releases. My participation in this activity is purely voluntary and I elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
5. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releases from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct. Should Releases or anybody acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
6. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical conditions which could interfere with my safety in this activity, or else I am willing to assume – and bear the costs of – all risks that may be created, directly or indirectly, by any such condition.
7. In the event that I file a lawsuit, I agree to do so solely in the state where Releases' facility is located, and I further agree that the substantive law of that state shall apply.
8. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.
9. I agree that the Releases will not be held liable for damage, loss or theft to any cochlear implants, hearing aids & devices, electronic devices and all other personal belongings, including but not limited to cell phones, tablets, laptops & their accessories, and equipment.
10. I understand that IBCD reserves the right to refuse acceptance of my application if it comes to their attention that I may cause a potential risk, either physically or behaviorally, to the safety and liability of the overall camp, its participants & Releases.

By signing this document, I agree that if I am hurt or my property is damaged during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. **I have read and understood this document and I agree to be bound by its term.**

Signature _____ Print Name _____

Address _____ City _____ State _____ Zip _____

Telephone (_____) _____ Date _____

PARENT OR GUARDIAN ADDITIONAL AGREEMENT (Must be completed for participants under the age of 18)

In consideration of _____ (PRINT minor's name) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releases from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Parent or Guardian _____ Print Name _____ Date _____

**WAIVER/RELEASE FOR COMMUNICABLE DISEASES
INCLUDING COVID-19**

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of the **Iowa Baseball Camp for the Deaf** and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While mitigation policies and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Iowa Baseball Camp for the Deaf, their officers, officials, agents, and/or employees, camp staff, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT.

Name of participant: _____

Participant signature: _____

Date signed: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of parent/guardian: _____

Parent/guardian signature: _____

Date signed: _____

IBCD Safety Rules

One of the most important things that we are concerned about at the IBCD is SAFETY. Baseball and softball can be a dangerous sport to play, BUT, with safety rules and guidelines in place, we are able to ensure that every camper will have a great experience. The sport itself has many gameplay rules, such as three strikes and you're out, or if you get four balls, you get a walk. However, the sport also has some safety rules. For example, ALL batters are required to wear helmets. For IBCD, we are using rules from several different organizations to make sure that every camper is learning how to play baseball in a safe, nurturing environment.

Some of the following rules will apply, but are not limited to:

- BE SAFE
- BE RESPECTFUL
- BE RESPONSIBLE
- PAY ATTENTION at all times, even if not participating in activities. A stray ball or bat could be headed your way.
- BE AWARE of what's happening around you.
- PAY ATTENTION to the camp staff and do what they tell you to do.
- REPORT any unsafe conditions to a camp staff.
- ALWAYS take safety precautions before starting a baseball activity (such as wearing helmets when batting, look around before swinging a bat, etc.)

These are just a few of the rules that we will be utilizing for the camp. During the first day of the camp, the coaches will review all the safety rules with the campers. ALL of the coaches and volunteers will reserve the right to add necessary rules at their own discretion, if needed. They will also, in their best judgment, determine the appropriate action to be taken to remedy any potential issues.

If a coach, or selected qualified volunteer, deems a camper is being unsafe and/or creating a dangerous situation at the camp, we will notify their parents. In such event where an incident is severe enough, the coaches and selected qualified volunteers reserve the right to terminate the camper's participation for the remainder of the week without any warnings given out. Parents will be notified immediately to pick up their camper.

Please have the camper review the Camp Safety rules with his/her parents/guardian. Also, please have the camper and the parent/guardian sign the line at the bottom of this page to show that all parties involved understand the rules.

Thank you!!

Camper Signature _____ **Date** _____

Parent/Guardian Signature _____ **Date** _____

IBCD Media Consent Form

I/we understand that there will be media and promotional coverage of **Iowa Baseball Camp for the Deaf (IBCD)** and its activities and I/we give our consent to publish my/our child's name and picture for such purposes. I/we hereby grant IBCD and their owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releases"), the irrevocable, unrestricted right to use, publish, display and distribute materials bearing my name, voice, likeness, or any other identifiable representation of myself, my family members, including my/our IBCD player/child. These materials may appear in any form, style, color, or medium whatsoever (including without limitation, photographs, video tapes, films, sound recordings, software, drawings, prints, broadcast, internet, and electronic and social media). I/we agree that all material containing identifiable representation of me (including without limitation, all negatives, plates and masters of any photographs, files, prints or tapes) shall be and remain the sole and exclusive property of the Releases. I/we hereby release and forever discharge Releases from any and all liability and damages relating to my name, voice, likeness or any identifiable representation of me. I/we hereby waive any right I may have to inspect or approve the finished materials or any part or element thereof that incorporates my name, voice, likeness or any other identifiable representation of myself, my family, including my IBCD player/child. I/we have agreed to the above in consideration of the opportunity given to me by the IBCD to appear in these materials. This form will be effective for the duration of the camp and all future events and publications in association with IBCD.

Signature _____ Print Name _____

Address _____ City _____ State _____ Zip _____

Telephone (____) _____ Date _____

PARENT OR GUARDIAN ADDITIONAL AGREEMENT
(Must be completed for participants under the age of 18)

In consideration of _____ (PRINT minor's name) being permitted to participate in this activity, I agree that my child's likeness may be used in any media releases as indicated above.

Parent or Guardian _____ Print Name _____ Date _____

Iowa Cubs Information



Principal Park
1 Line Drive
Des Moines, IA
50309

Thursday, June 27
Show up @ 5:30 p.m.
First pitch @ 6:38 p.m.

Friday, June 28
Show up @ 9:15 a.m.
Tour begins @ 9:30 a.m.



Thursday, June 27

IBCD will attend an Iowa Cubs game on Thursday, June 27 at Principal Park. The game will start at 6:38 p.m. Gates open 60 minutes before game time. The campers will have the opportunity to sign the national anthem on the field before the game and also sign "Take Me Out to the Ballgame" during the seventh-inning stretch. Selected campers will participate in various game activities, such as throwing out the first pitch and running in the B-Bops Race.

The Iowa Cubs will provide **free** comp tickets to the campers to attend the game as their guests. The campers will receive their tickets at the camp during the week from the camp coordinator. Please have the campers meet everybody on the second-deck mezzanine behind section 7 & 8, at 5:45 p.m. for a quick signing practice before the game begins.

All campers are required to have at least one Responsible Adult accompany and stay with them during the game. Families and friends are welcome to join the event with us. Please scan the QR code with your mobile to take you to their website to purchase the discounted digital tickets. Please do not include your camper in the ticket order.

Your tickets are **digital** and will be delivered to your mobile, or you can print them at home. The deadline to purchase these tickets is Monday, June 24 at 11:59 pm.

If you have any issues or need more information about the tickets, please contact Jason Gellis with the Iowa Cubs at (515) 280-2624 or jasong@iowacubs.com, or visit the ticket windows at Principal Park.

Friday, June 28

Families and friends are also welcome to join IBCD at Principal Park on Friday morning for a stadium tour and a pick-up game for the campers only on the field. Family and friends can watch on the field. **Please show up at 9:15 a.m. The tours will begin at 9:30 a.m.** The pick-up game will begin at approximately 10:15 a.m. Finally, please join us for an end-of-the-week pizza party for everybody to enjoy on the second-deck mezzanine behind home plate. Please fill out below how many will attend with you on Friday. This will help with our pizza order.

Rules for Principal Park (this applies to everybody, not only campers)

- No cleats allowed on the field
- Stay with your group at all time
- Each camper's group must have a Responsible Adult accompany and stay with them

Please keep the above section for your own information

Please submit the below section to Nancy Heuer, the camp coordinator

Camper Last Name	Camper First Name
Responsible Adult attending the Iowa Cubs events	Phone (Do you prefer to be reached by call or text ? Circle one) Please include area code
Relationship to Camper	How many will be in your party for the Friday event?
Responsible Adult signature	Date