

<b>Presidents Phone Numbers</b>
<hr/> (Home)
<hr/> (Cell)

# 7 & 8 YEAR OLD BASEBALL INVITATIONAL TOURNAMENT AFFIDAVIT

<b>Managers Phone Numbers</b>
<hr/> (Home)
<hr/> (Cell)

**YEAR:** \_\_\_\_\_

**LEAGUE NAME:** \_\_\_\_\_

- A. COMPLETE:** All spaces above must be completed as well as all spaces for each participant.
- B. DOCUMENTATION:** A tournament player verification form will be completed for each player. Proof of age (Birth Certificate), must be provided for verification of age, three (3) proofs of residence dated between 2/1 of past season and 1/31 of current season and medical release shall be attached to each player verification form. The manager must provide this book to the Tournament Director.
- C. OUT OF BOUNDARY PLAYERS:** All players not living within the boundaries of the League named above will have supporting waiver(s) attached to the player verification form. Valid waiver(s) include a school attendance form (for the current academic year), written permission from the Charter Committee in Williamsport, II(d) Form or IV(h) form signed by District Administrator..
- D. ELIGIBILITY OF PITCHERS:** The team manager is solely responsible for ensuring that any pitcher on this team who enters a game is eligible under all conditions listed in the Regular Season Rules and Regulations for Little League Baseball. *If an ineligible pitcher is used in a game, it may result in forfeiture by action of the District Administrator.*
- E. ELIGIBILITY OF PLAYER(S):** A player may be deemed ineligible by the District Administrator because of a violation of Little League Regular Season Rules and Regulations, improper League Age, improper/illegal waiver documentation or forged documentation.
- F. DOCUMENTATION CONTROL:** This Affidavit and all supporting documentation shall not be shared with or provided to opposing teams, media personnel or any other persons unless specifically approved in writing by the District Administrator, Western Regional Headquarters and Williamsport.

**CERTIFICATION:**

By our signatures below we certify that all information contained in this affidavit is true and correct, to the best of our knowledge. We have read and understand: 1) the Regular Season Rules and Regulations for Little League Baseball, 2) the Tournament Guidelines established by the District governing the conduct of this Tournament, 3) the team Manager or Coach may lodge a protest in accordance with the Rules and Regulations and that the game in progress will cease until said protest is resolved and 4) that the team manager is sole responsible for the eligibility of ALL pitchers and players on the team.

\_\_\_\_\_  
(Printed Name of President)

\_\_\_\_\_  
(Signature of President)

\_\_\_\_\_  
(Printed Name of Player Agent)

\_\_\_\_\_  
(Signature of Player Agent)

\_\_\_\_\_  
(Printed Name of Manager)

\_\_\_\_\_  
(Signature of Manager)

Jeffrey L Ahrens  
\_\_\_\_\_  
(Printed Name of District Administrator)

\_\_\_\_\_  
(Signature of District Administrator)

Player Name		League Age	District Admin. Approval
Address of Parent or Legal Guardian OR School			
Birth Date (MM/DD/YYYY)	Residence or School in Boundary? YES                      NO	Type Of Waiver	
Example:	John Smith	7	Initials
12345 Main Street Pleasantville, California			
09/02/2003	Residence or School in Boundary? YES <u>  X  </u> NO <u>          </u>	N/A	Date Approved
1.			
	Residence or School in Boundary? YES                      NO		
2.			
	Residence or School in Boundary? YES                      NO		
3.			
	Residence or School in Boundary? YES                      NO		
4.			
	Residence or School in Boundary? YES                      NO		
5.			
	Residence or School in Boundary? YES                      NO		

6.			
	Residence or School in Boundary? YES                      NO		
7.			
	Residence or School in Boundary? YES                      NO		
8.			
	Residence or School in Boundary? YES                      NO		
9.			
	Residence or School in Boundary? YES                      NO		
10.			
	Residence or School in Boundary? YES                      NO		
11.			
	Residence or School in Boundary? YES                      NO		
12.			
	Residence or School in Boundary? YES                      NO		

13.			
	Residence or School in Boundary? YES _____ NO _____		
14.			
	Residence or School in Boundary? YES _____ NO _____		

### REPLACEMENT PLAYER(S)

The spaces below are to be used for replacement of players. Such replacements MUST be permanent only. When a player is replaced his/her original space should be marked with a HEAVY BLACK line. Once a player on the original affidavit is replaced, he/she cannot return to the team. Exceptions can only be made in writing by the District Administrator.

A.			
	Residence or School in Boundary? YES _____ NO _____		
B.			
	Residence or School in Boundary? YES _____ NO _____		
C.			
	Residence or School in Boundary? YES _____ NO _____		

## MANAGER/COACH INFORMATION

**Phone Number(s):** List day and evening numbers. This will assist tournament staff in the event of rescheduling.

	NAME	ADDRESS	DAY PHONE	EVENING PHONE
<b>M</b>				
<b>C</b>				
<b>C</b>				

## MANAGER/COACH REPLACEMENT

Temporary replacement (single game only) of a manager/coach should NOT be entered. The replacement spaces below are to be used for permanent replacement only. When a Manager/Coach is replaced, his/her original space should be marked with a HEAVY BLACK line. Once a Manager/Coach on the original affidavit is replaced, he/she cannot return to the team. Exceptions can only be made in writing by the District Administrator.

	NAME	ADDRESS	DAY PHONE	EVENING PHONE
<b>M</b>				
<b>C</b>				
<b>C</b>				

## RECORD OF EJECTIONS

Player/Manager/Coach Name	Opponent	Date	Tournament Director Signature

