



# Lower Valley Little League



## PLAYER REGISTRATION FORM

Player Information			
Player's First Name:	Player's DOB:	Gender:	Returning:
Player's Address:			
Baseball or Softball:	Division:		

Player Jersey

Size: (circle one)    YS        YM        YL        AS        AM        AL        AXL        AXXL  
 1<sup>st</sup> Number        \_\_\_\_\_    2<sup>nd</sup> Number        \_\_\_\_\_    3<sup>rd</sup> Number        \_\_\_\_\_

*Please Note: Changes to jersey size after uniforms have been ordered incur additional charges for the league. These charges will be paid for by the parent/guardian of the player prior to ordering any change. If the incorrect size was ordered by the league this will be corrected by the league.*

### Parents/Guardians Information:

Parent/Guardian #1: \_\_\_\_\_ Parent/Guardian #2: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ Email: \_\_\_\_\_

If you are interested in volunteering to help the players have a more enjoyable and learning year. Lower Valley is interested in your help. We are a volunteer run organization and we are always searching for more volunteers. It is a commitment to the children and ensuring they have a fun and encouraging learning environment. Please indicate any position you have interest:

\_\_\_ Coach/Manager\*\*                      \_\_\_ Assistant Coach\*\*                      \_\_\_ Concession Stand  
 \_\_\_ Board Position\*\*                      \_\_\_ Committee Position                      \_\_\_ Field Maintenance\*\*

Division Baseball or Softball	League Age	Birthday Between Baseball Only		Birthday Between Softball Only		Registration Fee
		9/1/14	8/31/17	1/1/2014	12/31/2016	
T Ball	4 – 6	9/1/14	8/31/17	1/1/2014	12/31/2016	\$60
Coach Pitch	7 – 8	9/1/12	8/31/14	1/1/2012	12/31/2013	\$95
Minors	9 – 10	9/1/10	8/31/12	1/1/2010	12/31/2011	\$95
Majors	11 – 12	9/1/08	8/31/10	1/1/2008	12/31/2009	\$110
Juniors	13 – 15	9/1/05	8/31/08	1/1/2005	12/31/2007	\$110

\*\*Volunteer application along with clearance results must submitted to the League and background check cleared before any participation can occur with the kids. All Manager/Coach volunteers will be required to attend a CPR class provided by LVLL if not already certified. If certified proof of certification is required.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



# Lower Valley Little League

## PLAYER REGISTRATION FORM

1. I/We the parent(s)/guardian(s) of the above-named mentioned candidate for a position on a Little League team, hereby give my/our approval to participate in any and all Little League activities, including transportation to and from the activities.
2. I/We know participation in baseball or softball may result in serious injuries and protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify and agree to hold harmless the local Little League, Little League Baseball, Incorporated, the organizers, sponsors, supervisors, participants, and persons transporting my/our child to and from activities from any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.
3. I/We agree to return upon request the uniform and other equipment issued to my/our child in as good a condition as when received except for normal wear and tear.
4. I/We agree that my/our child (candidate) may be required to try out for a team. If such does not attend at least 50 percent of the tryouts, local Board of Directors' approval is required for such candidate to be placed on a team.
5. I/We understand that my/our child (candidate) may be chosen at any time to play on a Major Division team, if he or she is of the correct age for such division as determined by the local league and Little League Baseball. Declining to move up to such Major Division team will result in forfeiture of eligibility for the Major Division for the current season and may be subject to further restrictions by local league.
6. I/We agree to provide proof of legal residence (as defined by Little League Baseball, Incorporated) and age. I/We understand that my/our child (candidate) must be eligible under the residence and age regulations of Little League Baseball, Incorporated, to participate in this Local League, and if any controversy arises regarding residence and/or age, the decision of the Charter Committee in Williamsport shall be final and binding. I/We further understand that if any participant on a Little League team does not qualify for participation in the league based on residence (as defined by Little League Incorporated) and/or age, such participant and/or team on which he/she participates be found ineligible, and forfeit(s) and/or suspension of Tournament privileges may be decreased by action of the Charter Committee or Tournament Committee.
7. I/We will furnish a certified birth certificate of the above mentioned candidate to League Officials.