



Player Registration Form

LEAGUE USE ONLY

AGE

Player Name			Birthdate	/	/
Address			Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female
City/Zip			Candy Buy Out	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Home Phone	()		Previous Baseball Divisions Played: <input type="radio"/> T-Ball <input type="radio"/> Minors <input type="radio"/> Jr. <input type="radio"/> Farm <input type="radio"/> Majors <input type="radio"/> Sr. # Years Played: _____		

Parent/Guardian #1		Parent/Guardian #2	
Name		Name	
Cell Phone	()	Cell Phone	()
Email		Email	
Occupation		Occupation	

Emergency Contact (Other Than Parent/Guardian)		Medical Information	
Name		Health Carrier	
Phone	()	Policy #	
Relationship		Allergies	

1. I/We, the parents/guardians of the above-named 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 that 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 conditions as when received except for normal wear and tear.

4. I/We agree that our child (candidate) may be required to try out for a team. If such candidate 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 our child (candidate) may be chosen at anytime 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 the 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 our child (candidate) must be eligible under the residence and age regulations of Little League Baseball, Incorporated, to participate in this Local League, and that 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 Baseball, 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 decreed by action of the Charter Committee or Tournament Committee.

7. I/We will furnish a certified birth certificate of the above-named candidate to League Officials.

8. I/We hereby consent, grant, and give permission to UCALL to perpetually or otherwise use, reproduce, distribute, publicly display, and publicly perform in any and all forms whether now known or later developed, the image, name, voice, or likeness of the above named candidate in promotional materials, announcements, publications, media releases, training materials, or advertisements, electronic or otherwise and waive all rights to the same. I/ We also agree that neither the above named candidate, nor I/We, will receive any compensation whatsoever for the granting of this release.

9. In case of emergency, I hereby authorize my child to be treated by Certified Emergency Personnel. (i.e. EMT, First Responder, E.R. Physician)

Signature _____ Date _____

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Birth Cert.	Residence Proofs	Payment	Inside UCALL Boundary?	Initial
_____	_____	\$ _____ <input type="radio"/> Cash <input type="radio"/> Check	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____