



# Jourdanton Little League (League ID 3432114)

## Player Registration Form



**FOR BOARD PERSONNEL:**

**ACCOUNTING:**

TOTAL CHILDREN: \_\_\_\_ Child \_\_\_\_ of \_\_\_\_

TOTAL BALANCE: \$ \_\_\_\_ Rec'd: \_\_\_\_  
(1-\$45, 2-\$85; 3-\$120; 4-\$150, 5-\$180)

Check#: \_\_\_\_ Cash: \_\_\_\_

Check if PD in full. Rec'd By: \_\_\_\_

**SHIRT SIZE:**

Youth XS: \_\_\_\_ SM: \_\_\_\_ MED: \_\_\_\_ LG: \_\_\_\_ XL: \_\_\_\_

Adult XS: \_\_\_\_ SM: \_\_\_\_ MED: \_\_\_\_ LG: \_\_\_\_ XL: \_\_\_\_

Parent Initial: \_\_\_\_

League Initial: \_\_\_\_

**DOCUMENTATION:**

Birth Certificate:  Yes  No

Medical Release:  Yes  No

Waiver Needed:  Yes  No

Proof of Residency:  One  Two  Three

League Age: \_\_\_\_

League Initial: \_\_\_\_

**Must attend try-outs.  Try-outs are optional.  Try-outs are not required.**

**By printing, please fill out the form below this line and ensure all copies are legible. Please press hard.**

Gender:  Male  Female      My child will participate in:  Little League Baseball       Little League Softball

Player Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Parent #1 - Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  Volunteer

Parent #2 - Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  Volunteer

Are there any special skills that either parent can offer the league? \_\_\_\_\_

Emergency Contact (other than parent): \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone(s): \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Please initial each item below:

\_\_\_\_ 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.

\_\_\_\_ 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 and its Board of Directors, 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.

\_\_\_\_ 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.

\_\_\_\_ I/We agree that 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.***

\_\_\_\_ 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.

\_\_\_\_ 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.

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

\_\_\_\_ I/We also give our consent for Jourdanton Little League to use any pictures of or depicting my child on its web site located at [www.jourdantonlittleleague.com](http://www.jourdantonlittleleague.com) or to submit same to local media for publication.

\_\_\_\_ I/We agree to participate in Jourdanton Little League fundraisers and will be responsible for turning in money and in the event that any fundraising items are lost, will be financially responsible for reimbursement to the League.

**Important Dates:**

**Try-Outs: February 7 and 8, 2009 | Draft Begins: February 16, 2009**

**Announcement Date: February 23, 2009 | Practice Begins: March 4, 2009 | Opening Day: March 28, 2009**

Signature \_\_\_\_\_ Date \_\_\_\_\_