



HAMPTON Little League Player Registration Form



Player Name	(Last)	(First)	(mmddy)
Address			Birthdate
			Gender
		(Postal Code)	Age
Home Phone			
Player Email			Div. Last Played

Parent #1

Parent #2

Name			Name		
Phone			Phone		
Email			Email		
Occupation			Occupation		
Volunteer as			Volunteer as		

Medical Information

League Information

Emergency Contact Phone -		Concession payment: \$40 chq or cash
Relationship to Player		Birth Certificate #:
CARE CARD #		3 Pieces of Address Verification:

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 all activities.
2. I/We know that participation in baseball 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 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 we received
4. 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.
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 such a move up to the Major Division team will result in the 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 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.

Signature _____

Date _____