



# Palm Bay West Little League

## Official Player Registration



**PLAYER INFORMATION** [PLEASE PRINT] Baseball  Softball

Player Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Boy  Girl

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**CONSENT**

- |   |   |
|---|---|
| <ol style="list-style-type: none"> <li>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.</li> <li>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 Palm Bay West 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.</li> <li>3. <b>I/We understand that parents are expected to perform service in the League's concession stand for a minimum of two (2) scheduled shifts for each registered child during the season.</b></li> <li>4. I/We agree to return upon request any equipment issued to my/our child in as good of condition as when received except for normal wear and tear.</li> <li>5. I/We agree to provide proof of legal residence or school enrollment (as defined by Little League Baseball, Incorporated at <a href="http://LittleLeague.org/residence">LittleLeague.org/residence</a>) and age. I/We understand that our child (candidate) must be eligible under the residence/school attendance and age regulations of Little League Baseball, Incorporated, to participate in this Local League,</li> </ol> | <p>and that if any controversy arises regarding residence/school attendance and/or age, the decision of the Little League International Charter Committee in Williamsport, Pennsylvania 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 Little League International Charter Committee or Little League International Tournament Committee.</p> <ol style="list-style-type: none"> <li>6. 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. For all-star eligibility candidates must attend at least 50 percent of the tryouts.</li> <li>7. I/We understand that our child (candidate) may be chosen at any time to play on a Major Division team, if he/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 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.</li> <li>8. I/We will furnish a certified birth certificate of the above-named candidate to League Officials.</li> </ol> |
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Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR LEAGUE USE ONLY** [TO BE COMPLETED BY A BOARD MEMBER]

Registration Fee: \$ _____	Spring <input type="checkbox"/> Fall <input type="checkbox"/>	LEAGUE AGE: _____
Misc: _____ \$ _____	Division: Tee Ball <input type="checkbox"/> C/P <input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/>	
<b>TOTAL DUE:</b> \$ _____	Shirt Size: YS YM YL AS AM AL AXL A2XL A3XL	
<b>TOTAL PAID:</b> \$ _____	Primary Number: _____ Secondary Number: _____ (SPRING ONLY)	
<b>BALANCE DUE:</b> \$ _____	CASH <input type="checkbox"/> CHECK <input type="checkbox"/> # _____	CREDIT CARD <input type="checkbox"/>

**FORMS NEEDED:** Birth Cert: Y/N    3 Proofs of Res: Y/N    Medical Release: Y/N    Code of Conduct: Y/N

Model Release: Y/N    Volunteer Form: Y/N    Waivers needed: Y/N     **LEAGUE VOLUNTEER**