

Foothill Farms Little League

Player Registration Form

(Complete one form per child)

Player Information

Last Name: _____ First Name: _____ Nickname: _____

Gender: Male/Female Birth date: _____ Age: _____ School: _____ Grade: _____
 (Month/day/year)

Did child play baseball last spring? Yes/No if yes: League: _____ Division: _____ Team: _____

Shirt size (T-Ball through Major Divisions Only): This is only a guideline for ordering shirts. Due to pre-season ordering deadlines, there is no guarantee that your player will receive the size requested.

() Youth Small () Youth Med. () Youth Lg. () Youth X-Lg. () Adult Small () Adult Med.

Player resides with: [] Father [] Mother [] both [] Legal Guardian

Father or Legal Guardian's Information	Mother or Legal Guardian's Information
Name:	Name:
Address*:	Address*:
City*:	City*:
State*:	State*:
Zip Code*:	Zip Code*:
Home Phone # ()	Home Phone # ()
Work Phone # ()	Work Phone # ()
Cell Phone # ()	Cell Phone # ()
Occupation:	Occupation:
E-mail:	E-mail:

* Players and parents are advised that a false statement of residence may lead to ineligibility to play Little League Baseball

I/We, the parents and/or guardian of the above named candidate for a position on a league team, hereby give my/our approval to participate in any and all league activities. I/We assume all risks and hazards incidental to such participation, including transportation to and from activities. I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the local league, the chartering organization, the organizers, sponsors, participants and persons transporting my/our child, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident and liability insurances. I/We understand that the insurance carried by this league covers only the amount that is not paid by my/our carrier. I/We agree to return upon request the uniform and other equipment issued to my/our child in as good a condition as when issued, except for normal wear and tear. I/We will furnish a Certificate of Live Birth of the above named candidate to league officials at registration. I/We agree to provide proof of legal residence (as defined by Little League Baseball, Inc). "Residence" refers to a place of bona fide continuous habitation. Once established, a place of residence shall not be considered changed unless the parents, parent, or legal guardian make a bona fide change of residence. ****A \$25.00 fee will be charged on all returned checks****

Signature of Authorized Parent/Legal Guardian _____ Date: _____

*****Official Use Only*****

Amount Due \$ _____ Sibling Discount Applied Yes/No Amount Paid \$ _____ Cash [] Check # _____
 Birth Certificate Yes/No League Age: _____ Proof of Residency Yes/No Resides within FLL boundaries Yes/No II (d) Form
 Yes/No Player Registration/Medical Release Signed Yes/No Parent Responsibility Form Signed Yes/No