



Hampshire County Little League Player Registration

League Year _____

League ID: 03480615

**League Use
Only**

- Birth Certificate Medical Release Fall Ball
 Volunteer Form Publication Authorization League Age _____

This child is registering for: Baseball Girl's Softball

(Circle One)
Male Female

Player (First Name) (MI) (Last Name) (Birthdate) MM/DD/YEAR

Cell Phone Number Home (Alternate Phone #) Name of Parent/Guardian where child resides

Physical Address Mailing Address (If Different)

City State Zip City State Zip

Child's Shirt Size (circle): **YS YM YL AS AM AL AXL** **Preferred Jersey #:** _____

Preferred play area (Practices will be in the preferred play area) (Circle One): **Capon Bridge Paw Paw Romney**

Child's School _____ Grade _____

Years of Experience _____ Did this child participate last year? No Yes, Which team? _____

Which position(s) played? Pitcher Catcher Infielder Outfielder

Does this child have a sibling registering this year? No Yes, Sibling's Name? _____

Did the sibling participate last year? No Yes, Which team? _____

Medical Information

Emergency Contact _____ Phone _____

Relationship to Child _____ Dr. Name / Phone # _____

Insurance Carrier _____ Policy _____ Group _____

May we publish your child's photo on our website, social media page, or newspaper? Yes No (See Back for details)

Comments / Requests: _____

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, 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. If applicable, 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 to provide proof of legal residence or school enrollment (as defined by Little League Baseball, Incorporated at LittleLeague.org/residence) 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, 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. 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. If applicable, I/We understand that our child (candidate) may be chosen at any time 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 will furnish a certified birth certificate of the above-named candidate to League Officials. I/We understand that my information as the parent or guardian of such above-named candidate is sent by the local league to Little League International each year. Such use of information by Little League International can be found here: www.LittleLeague.org/privacypolicy. You may opt-out of communications from Little League International at any time.

Signature _____ **Date** _____

Image / Media Release: I hereby consent, grant, and give my permission to Little League Baseball, Incorporated (hereafter 'LLB') and any third party which LLB determines in its sole discretion to be appropriate including, but not limited to, any and all sponsors and/or licensees of LLB a royalty free, irrevocable license, to use, exploit, adapt, modify, reproduce, distribute, publicly display, and publicly perform, throughout the world in any and all forms whether now known or later developed, the image, name, voice, or likeness of the above listed minor in any and all commercial exploits or ventures, promotional materials or announcements, publications, media releases, or advertisements, electronic or otherwise ('Work(s)'), in perpetuity, and waive any and all rights to the same. I acknowledge and agree that neither the above listed minor nor I will receive any compensation whatsoever if such image, name, voice, or likeness appears in any Works, or from any proceeds of any utilized Work. I acknowledge and agree that any use of such image, name, voice, likeness, or resulting Work is solely the property of LLB in perpetuity. In addition, I acknowledge and agree that LLB may, without my permission or advance notice to me, supply such image, name, personal information, voice, likeness, or resulting Work to, for any use, publication, and/or offer you information, programs, and services, any third party which LLB determines in its sole discretion to be appropriate.