

- BASEBALL  
 SOFTBALL

## Chet Waggoner Little League 2012 Regular Season Registration Form

Birth date: \_\_\_\_\_ Date: \_\_\_\_\_

League Age: \_\_\_\_\_ Medical Alert Medal \_\_\_\_\_

LAST NAME: \_\_\_\_\_ M.I. \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ E-MAIL \_\_\_\_\_

GRADE \_\_\_\_\_ SCHOOL \_\_\_\_\_

Player lives with:  Mother  Father  Both  Other \_\_\_\_\_

Coach Should Contact: \_\_\_\_\_

### League Use Only

2011 Division of Play: \_\_\_\_\_

2012 Division of Play: \_\_\_\_\_

Initials: \_\_\_\_\_

- Birth Certificate  
 Medical Release  
 Proof of Residency  
 Waiver Needed  
\_\_\_\_\_

Volunteer Form

- Raffle Tickets  
 Payment Received

Parent(s)/Guardian Name \_\_\_\_\_

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

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

E-Mail: \_\_\_\_\_ Occupation \_\_\_\_\_

Volunteer? \_\_\_\_\_

Parent(s)/Guardian Name \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

E-Mail: \_\_\_\_\_ Occupation \_\_\_\_\_

Volunteer? \_\_\_\_\_

### LITTLE LEAGUE RELEASE

I, the parent/guardian of the above named candidate for a position on a Little League team, hereby give my approval to participate in any and all Little League activities, including transportation to and from the activities.

I 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, Inc., the organizers, sponsors, participants and persons transporting my child to and from activities for any claim arising out of an injury to my child whether the result of negligence or for any other cause.

I agree to return upon request the uniform and other equipment issued to my child in as good conditions as received except for normal wear and tear.

I agree that my child (candidate) may be required to try out for a team. If such does not attend the tryouts, the local Board-of-Directors' approval is required for such candidate to be placed on a team.

I understand that my child(candidate) may be chosen at anytime 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 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 agree to provide proof of legal residence (as defined by Little League Baseball, Inc.) and age. I understand that our child (candidate) must be eligible under the residency and age regulations of Little League Baseball, Inc., to participate in this Local League, and that if any controversy arises regarding residency and/or age, the decision of the Charter Committee in Williamsport shall be final and binding. I 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, Inc.) and/or age, such participant and/or team on which he/she participated 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 will furnish a certified birth certificate of the above-named candidate to League Officials.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*I hereby give permission for my child's photographic likeness in all forms to be used by Chet Waggoner Little League in publications and on their website for advertisement purposes. Initials: \_\_\_\_\_*

**T-BALL ONLY – Coach/Player Request**