

Patriot League Registration Form

Year: _____

Player Name: _____

Birthdate (mm/dd/yyyy): _____

Address: _____

League Age: _____ Gender: Male Female

City: _____ Zip: _____

Home League: (Circle One) Allied Gardens Lake Murray

Phone: _____

La Mesa National Mission Trails Rolando San Carlos

Email: _____

Circle positions played: Catcher 1B 2B 3B SS OF

School: _____ Grade: _____

Pitching Experience: Minimal Average Proficient

Jersey Size: (Adult sizes only) S M L XL 2XL

Does your child play travel ball? Yes No If "yes," will this limit playing time with the Patriot League? Yes No

Participation in Junior/Senior baseball requires the ability to run, throw, swing a bat and catch a ball. Additionally, participation requires the capacity to understand the rules of the game. Does your child have any condition that limits his/her ability to participate in this activity Yes No

Parent/Guardian #1: _____

Parent/Guardian #2 _____

Address: _____

Address: _____

City: _____ Zip: _____

City: _____ Zip: _____

Phone: _____ (Home)

Phone: _____ (Home)

Phone: _____ (Cell)

Phone: _____ (Cell)

Email: _____

Email: _____

TERMS AND CONDITIONS OF LITTLE LEAGUE

I/We, the parents of the above named candidate for position on a Senior/Junior league team, hereby give my/our approval to participate in any and all Senior/Junior league activities, including transportation to and from the activities. I/We know that participation in baseball may result in serious injuries and protective equipment does not prevent all injuries to players. I/We do hereby waive, release, absolve, and agree to hold harmless the local Little League, Little League Baseball Inc., the organizers, sponsors, 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, except to the extent and in the amount covered by accident or liability insurance. If applicable, I/We agree to return upon request the uniform and other equipment issued to my/our child in as good condition as when received except for normal wear and tear. I/We will furnish a certified birth certificate of the above-named candidate to League Officials. I/We agree to provide proof of legal residence or school enrollment (as defined by Little League Baseball, Incorporated at http://www.littleleague.org/Assets/forms_pubs/tournaments/Residence-Eligibility-Requirements.pdf) 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) will 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. 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 Parent #1: _____ Date: _____

Signature Parent #2: _____ Date: _____

VOLUNTEER COMMITMENT

I understand that the Patriot League is a privately sponsored non-profit organization of volunteer workers and that by registering my child or ward to play in the Junior or Senior divisions I am agreeing to share in the volunteer work. I understand that this involves an adult member of our family to volunteer a minimum of one shift in the concession stand sometime during the season. I would also like to volunteer in the area of work checked below:

Signature Parent #1: _____ Check One: Manager Coach Team Parent
 Field Prep Umpire Scorekeeper Board Member

Signature Parent #2: _____ Check One: Manager Coach Team Parent
 Field Prep Umpire Scorekeeper Board Member

Internal Use Only:

Birth Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	Parent #1 Vol App: <input type="checkbox"/> Yes <input type="checkbox"/> No	League Member Parent #1	<input type="checkbox"/> Yes <input type="checkbox"/> No
Medical Release Form	<input type="checkbox"/> Yes <input type="checkbox"/> No	Parent #2 Vol App: <input type="checkbox"/> Yes <input type="checkbox"/> No	League Member Parent #2	<input type="checkbox"/> Yes <input type="checkbox"/> No
Proof of Residency or			Registration Fee Paid	<input type="checkbox"/> Yes <input type="checkbox"/> No
School Enrollment	<input type="checkbox"/> Yes <input type="checkbox"/> No		Membership Fee Paid	<input type="checkbox"/> Yes <input type="checkbox"/> No
Waiver Needed	<input type="checkbox"/> Yes <input type="checkbox"/> No	Division: _____		