



Cedar Lake Little League 2012 Player Registration Form

New Returning

Player Name	Last	First
Player Address		
City, State, Zip		
Home Phone	()	

Birthdate	
Gender	Age

League Use Only		
Reg. Fee	Fundraiser	Other Fees
Total Fees	Amt. Paid	How Paid

Shirt Size (Circle One)	Youth Small	Youth Medium	Youth Large	Youth X-Large
	Adult Small	Adult Medium	Adult Large	Adult X-Large

Please list any brothers/sisters (and age) in the league _____

Parent #1	Parent #2
Name _____	Name _____
Phone () _____	Phone () _____
Work Phone () _____	Work Phone () _____
Cell Phone () _____	Cell Phone () _____
Relationship <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian	Relationship <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian
Email _____	Email _____
Volunteer? <input type="checkbox"/> If checked, fill out "Volunteer Application"	Volunteer? <input type="checkbox"/> If checked, fill out "Volunteer Application"

Medical Information	League Use Only
Emergency Contact _____	Birth Certificate Yes No
Relationship to player _____	Proof of Residency Yes No
Insurance carrier _____	Medical Release Yes No
Phone _____	Waiver Needed? Yes No
Policy _____	Level Assigned _____
	Team Name _____

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.
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 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.
3. 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.
4. 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 tryouts, local Board-of-Directors' approval is required for such candidate to be placed on a team.
5. I/We understand that our child (candidate) may be chosen at anytime 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.
6. I/We agree to provide proof of legal residence (as defined by Little League Baseball, Incorporated) and age. I/We understand that our child (candidate) must be eligible under the residence and age regulations of Little League Baseball, Incorporated, to participate in this Local League, and that if any controversy arises regarding residence and/or age, the decision of the Charter Committee in Willimsport 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 Charter Committee or Tournament Committee.
7. I/We will furnish a certified birth certificate of the above-named candidate to League Officials.

League Website
www.eteamz.com/cedarlake

Signature _____ **Date** _____