

EAST BRIDGEWATER LITTLE LEAGUE 2012 REGISTRATION

East Bridgewater Little League is focused on insuring that all our children be given the opportunity to participate in both baseball and softball regardless of their financial situation. Please email - EBLL@comcast.net

1. Please complete one form per family
2. Please make checks payable to E.B.L.L.
3. Mail completed Registration to **EBLL, P.O. Box 75, E.B. 02333**

Baseball

Divisions below are determined by your child's age as of **APR, 30, 2012**

Division	Age	FEE
T Ball / Instr.	5 and 6	\$80.00
Farm League	7, 8 and 9	\$110.00
Minor League	9,10,11 and 12	\$110.00
Major League	10,11,and 12	\$110.00
Junior League	13 and 14	\$130.00
Senior League	15 and 16	\$130.00

Softball

Divisions below are determined by your child's age as of **DEC, 31, 2011**

Division	Age	FEE
T Ball / Instructional	5 and 6	\$80.00
Minor League	7,8,and 9	\$110.00
Major League	10,11,and 12	\$110.00
Senior League	13,14,15 and16	\$130.00

In lieu of raffle and calendar fundraising registration fees have been increased.

Childs Information

AGE

Parent Information

Child's Name	Date of Birth	Baseball by 4/30/12	Fee	Mother		Father
		Softball by 12/31/11		First Name	Last Name	
			\$			
			\$			
			\$			
			\$			
Family Cap = (\$230.00) **All Divisions		Total Fee				

Please print a clear Email address

I/We the parents or legal guardian of the candidate(s), named on this application, 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 local Little League, Little League Baseball Incorporated, the organizers, sponsors, supervisors, participants and persons transporting my/our child to and from activities for any claim arising out of any injury to my/our child whether the result of negligence or any other cause, except to the extent and in the amount covered by accident or liability insurance.

I/We will furnish a certified Birth Certificate of the above named candidate to League Officials.

Parents Signature, _____

Date _____

Snack Bar

Please support the League by volunteering to work in the snack bar.

Are you interested in volunteering in our snack bar

YES

NO

Coaching Info

Name	
Division of Interest	

Birth certificate on file

Amount Paid

Check #