

Harrison Little League

Winter 2020

PLAYER REGISTRATION ONLINE BY CLICKING ON OUR WEBSITE USING A CREDIT/DEBIT CARD

www.harrisonlittleleague.org

APPLICATIONS ARE AVAILABLE AT THE SOLLAZZO AND MINTZER CENTERS

ALL FIRST TIME APPLICANTS MUST UPLOAD A COPY OF YOUR CHILD'S BIRTH CERTIFICATE

Checks made to Harrison Little League

- 1) REGISTRATION - \$95.00 Late Fee (after February 24th) \$125.00
- 2) Copy of Birth Certificate - All First Time Applicants

HARRISON RECREATION CENTERS

Sollazzo Recreation Center
 270 Harrison Avenue
 Harrison, N.Y.10528
 (914) 835-3130

Leo Mintzer Center
 251 Underhill Avenue
 West Harrison NY 10604
 (914) 949-5265

****YOU MUST BE A HARRISON RESIDENT TO PLAY****
(PARENT MUST HAVE A 2020 TOWN OF HARRISON PHOTO ID #)
DRIVERS LICENSE AND A UTILITY BILL ARE REQUIRED

Cut Here

Little League Registration

(Please Circle)

Child's Name _____ Gender M F

Address and Zip _____

Parent (1) _____ Cell _____ Hme _____

Parent (2) _____ Cell _____ Hme _____

School _____ Parent/Caregiver's 2020 Harrison ID# _____

Date of Birth: Month _____ Day _____ Year _____

Please Print Legibly

e-mail - 1																				
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e-mail - 2																				
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Health Insurance Company _____ NO. _____
 (I, We), the parent(s) or legal guardians of the child named above, hereby give our consent for participation in the 2020 Harrison Youth Baseball Program. We assume all risks and hazards incidental to such participation, including transportation to and from activities of the program; and we hereby waive, release absolve, indemnify, and agree to hold blameless Harrison Recreation/Harrison Little League, its officers, directors and agents; Harrison Little League Baseball, Town/Village of Harrison, Harrison School District, and the organizers, sponsors, supervisors, participants and persons transporting our child to and from these activities, from any claim arising out of an injury to our child, except in the amount covered by accident and liability insurance purchased for the protection of properly registered players.

Print Both Parent's Names
Caregiver's Name _____

Parent/Caregiver's Signature _____

(I, WE) can support the Program by Coaching _____

Major League Sponsor _____ \$400 Team Sponsor _____ \$200