

Annandale - North Springfield Little League Player Registration - Spring 2017

	First	Last			
Player Name			Birthdate mm/dd/yy		
Player Address			Age on April 30		
	City	St.	Zip		
School / Grade			Grade:	Bats	Gender
Home Phone					
Main Email for ANSLL email list					
Last seasons league(s)	Spring	Fall	Projected league (not guaranteed)		

Parent #1			Parent #2		
Name			Name		
Phone			Phone		
Work Phone			Work Phone		
Cell Phone			Cell Phone		
Email			Email		
Volunteer?	If checked, fill out "LL Volunteer Application"		Volunteer?	If checked, fill out "LL Volunteer Application"	

I have filled out an ANSLL Volunteer form to:		
Manage	Coach	Umpire
Requests (requests are not guaranteed and are only considered for A & Rookie)		

Player Medical Information
<u>Allergies / Conditions</u>
Note: Each player will need a Medical Form completed for the manager to have

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 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 uniforms and ANSLL equipment issued in as good condition as when received except normal wear & tear.
4. I/We agree that our child (candidate) 9 and older will be required to attend evaluations. If such does not attend evaluations, local Board-of-Directors' approval is required for such candidate to be placed on a team by the Player Agent.
5. I/We understand that our child (candidate) may be chosen at anytime to play on a higher 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 an upper division team will result in forfeiture of eligibility for that upper 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 the applicant 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.

ANSLL Use Only	Birth Certif	Residency	Waiver	How Paid	Booster	Amount Paid	
<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes		<input type="checkbox"/> Silver \$10		
<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No		<input type="checkbox"/> Gold \$25		
					<input type="checkbox"/> Platinum \$30+		
							Total

Signature _____ **Date** _____