



Council Rock Holland Little League (CRHLL)
 Non-Profit 501(c)(3)
 P.O. Box 104
 Richboro, PA 18954
baseball@crhll.com
www.crhll.com

In-House Registration Form (2019)

Player's Name (herin "candidate"): _____

Date of Birth: _____ School Child Attends: _____

Request for Coach or other player(s) (Ages 7 & Below): _____

Division (Please see documentation to determine):

- | | | |
|---|---|--|
| <input type="checkbox"/> T-Ball League | <input type="checkbox"/> Majors (10YO–12YO) | <input type="checkbox"/> Sr. Babe Ruth (17YO – 18YO) |
| <input type="checkbox"/> Bambino League (6YO) | * If candidate is a returning N.L. player what team? | <input type="checkbox"/> American Legion Prep (13YO) |
| <input type="checkbox"/> Rookie League (7YO) | _____ | <input type="checkbox"/> Jr. Legion Prep (14YO–15YO) |
| <input type="checkbox"/> A League (8YO) | <input type="checkbox"/> Jr. Little League® (13YO–14YO) | <input type="checkbox"/> Sr. American Legion (16YO–18YO) |
| <input type="checkbox"/> AA League (9YO) | <input type="checkbox"/> Sr. Little League® (14YO–16YO) | |

***National League candidates or returning players must sign a separate COMMITMENT FORM.**

Signing this commitment form does not guarantee placement on a National League team.

Player's Address & Parent/Guardian Information:

Address: _____	Father's Name: _____
Address 2: _____	Father's Cell Phone #: _____
City/St/Zip: _____	Father's E-Mail: _____
Home Tel#: _____	Mother's name: _____
Cell Phone #: _____	Mother's Cell Phone #: _____
E-Mail: _____	Mother's E-mail: _____

SPONSORS NEEDED

Read and sign the reverse side

In order to cover the costs of running the league including field maintenance, utilities, equipment, uniforms, and umpire fees; CRHLL needs the support of sponsors. There are many options for sponsorships and we would love to work with you to find what works for you and our youth program. If you would like to be contacted regarding a sponsorship, please fill this out: Phone #:

 Name: _____ E-Mail: _____

VOLUNTEERS NEEDED

CRHLL is a non-profit, volunteer organization that needs everyone's help to be successful. Please check off on this form any areas that you feel you and/or your spouse would like to contribute to the organization to benefit your child and the whole program.

- Head Coach Asst. Coach Umpire Commissioner Team Parent Snack Shack Fundraising
 Field maintenance Facility maintenance Super Sunday/Picture Day

Completed registrations can be mailed to CRHBO, PO Box 104, Richboro, PA 18954
Please include all required paperwork, which may include Medical Forms, Commitment Letters, etc.
Checks are payable to CRHBO



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REFUND POLICY: Prior to March 1st, families may receive a full refund minus a \$25 processing fee.
NO REFUNDS WILL BE ISSUED AFTER MARCH 1st.

Terms & Conditions:

Any reference to "Little League" includes Little League Baseball Incorporated, Little League International, and the local Little League program: Council Rock Holland Little League (aka: CRHLL, Council Rock Holland Baseball Organization, CRHBO, Holland Little League, and any other names associated with the local league).

- (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) If applicable, 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 to provide proof of legal residence and/or age upon request. I/We understand that our child (candidate) must be eligible under the residence and/or 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 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.
- (5) 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 the tryouts (if applicable), the local Board of Directors' approval is required for such candidate to be placed on a team.
- (6) If applicable, I/We understand that our child (candidate) may be chosen at any time 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.
- (7) I/We will furnish a certified birth certificate of the above-named candidate to League Officials, upon request.
- (8) I/We understand that our information as the parent(s) and/or guardian(s) 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. Additionally, the local Little League may use my contact information for notifying me of various league events and communications. If I want to opt out of such communications from the local league, I agree that I will notify them in writing.
- (9) I hereby grant permission for CRHLL/CRHBO and/or any of its affiliates or any other name it is known as and/or its host Little Leagues to photograph, film, videotape or digitally record images of the above-named candidate and to use it as they see fit in publicity about the league and its programs or events, or in their various publications including but not limited to programs and handbooks, league journals or notices about the league's activities. I also grant permission for any of those images to be posted on a CRHLL/CRHBO website or social media page, or on websites of its host leagues or on a website of organizations deemed suitable by CRHLL/CRHBO's Board of Directors by virtue of their sponsorship or similar relationship with the program. The foregoing permission also applies to news media that may cover CRHLL/CRHBO games, activities or special events for the news media to record and publish images, either still or moving, of the above-named candidate.
- (10) In case of emergency, if family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel. (i.e. EMT, First Responder, E.R. Physician). I also agree to fill out and provide a copy of the 2016 Medical Release Form to CRHLL. (11) All updated and current forms, tryout dates, and other information can be found at www.crhll.com

Signature of Father, Mother, or Legal Guardian: _____

Printed Name: _____ Date: _____

This section for CRHLL use only:

Player registration fee \$: _____ Date Received: _____ Received By: _____ Total payable to CRHBO \$: ____ Check #: _____
 _____ Cash: _____

Notes: _____