

## Brighton Little League Baseball/Softball Player Registration Form Spring 2010

(Please Print)

### Player Information

Player's Last Name ▶		Player's First Name ▶	
Player's Mailing Address, Street, City, Zip: ▶			Gender (B/G) ▶
Player's School ▶		Player's Grade (in Spring 2010) ▶	Birthdate (M/D/Y) ▶
Parent/Guardian 1 Full Name: ▶			
Parent/Guardian 1 Phone #s: ▶	Home:	Cell:	Work:
Parent/Guardian 2 Full Name: ▶			
Parent/Guardian 2 Phone #s: ▶	Home:	Cell:	Work:
Primary Email Address ▶			
Additional Email Address ▶			
Pants Style / Size ▶	Waist Style (Circle one): Belted or Elastic? Size (Circle one): Youth S, M, L, XL; Adult S, M, L, XL, 2XL		

### Desired Program

*Check the box for the appropriate league. Program level assignment is based on school grade during Spring 2010. Family Max=\$300.  
\*If your child will be 12 years old on May 1<sup>st</sup> 2010 and is in 7<sup>th</sup> grade they have the option of playing Majors or Juniors.*

Grade	Baseball	√ Box	Cost	Softball (girls only)	√ Box	Cost
<b>K</b>	<b>Saturday Instructional Program (SIP) (for all boys and girls)</b>					<b>\$85</b>
<b>1</b>	<b>Rookies A Baseball</b>		<b>\$115</b>	<b>Rookies Softball</b>		<b>\$95</b>
<b>2</b>	<b>Rookies AA Baseball</b>		<b>\$115</b>			
<b>3</b>	<b>Minors A Baseball</b>		<b>\$125</b>	<b>Minors Softball</b>		<b>\$125</b>
<b>4</b>	<b>Minors AA Baseball</b>		<b>\$125</b>			
<b>5, 6</b>	<b>Majors Baseball</b>		<b>\$125</b>	<b>Majors Softball</b>		<b>\$125</b>
<b>*7,8</b>	<b>Juniors Baseball</b>		<b>\$125</b>	<b>Juniors/Seniors Softball</b>		<b>\$125</b>
<b>9,10</b>	<b>Seniors Baseball</b>		<b>\$125</b>			

**SPECIAL REQUESTS:** *In recognition of parents desire to arrange carpools, Brighton Little League will consider requests to pair children from different families in the SIP, ROOKIE and SOFTBALL Leagues Only. Please feel free to make request below with the understanding that it may or may not be granted.*

Request: \_\_\_\_\_

### Parent Volunteers & Waiver

*Brighton Little League urges parents to participate in the program. Please join us in providing a quality experience for our children by volunteering in one or more of the capacities listed below.*

**Head Coach** \_\_\_ **Assist Coach** \_\_\_ **Field Day** \_\_\_ **Opening Day Parade** \_\_\_ **Team Sponsor** \_\_\_

I, parent/guardian of the above named registrant, hereby give my approval to his/her participation in any or all Brighton Little League activities, including transportation to and from baseball/softball activities.

I know that participation in baseball or softball may result in serious injuries and protective equipment does not prevent all injuries to players. I, do hereby waive, release, absolve, indemnify and agree to hold harmless Brighton Little League, Little League Inc. , the organizers, sponsors, supervisors, coaches, participants and persons transporting my child to and from activities for any claim arising out of any injury to my child whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Submit form and fee to Brighton Little League, PO Box 18327, Rochester, NY 14618**  
**Submit this form by Feb. 6, 2010 to avoid a \$30 late fee.**