



Stamford National Little League 2012 Player Registration

Player name		
Address		
Address2		
City/State/Zip		
Home phone	Evening Phone	
Email		

Birth date:	<i>MM</i>	<i>DD</i>	<i>YYYY</i>
Gender:			
League age / Fee	<i>Age</i>	<i>Fee</i>	
Division	* Draft Eligible 9 or 10 *		
	Circle one: Yes No		

Parent #1	Relationship		
Name			
Address			
Address2			
Phone			
Email			
Occupation			
Volunteer Role	<input type="checkbox"/> If checked, fill out "Volunteer Application"		

Parent #2			
Name			
Phone			
Email			
Volunteer Role	<input type="checkbox"/> If checked, fill out "Volunteer Application"		

Medical Information			
Emergency Contact			
Relationship to player			
Family Physician			
Physician Address			
Hospital Preference			

Phone			
Insurance Carrier			
Policy			
Date of Tetanus			

Medical Comments			
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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 that our child (candidate) may be required to try out for a team. If such does not attend either of the tryouts, local Board-of-Directors' approval is required for such candidate to be placed on a team
4. I/We agree to provide proof of legal residence (as defined by Little League Baseball, Incorporated) and age. I/We understand that our child (candidate) 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 Williamsport shall be final and binding.
5. I/We will furnish a certified birth certificate of the above-named candidate to League Officials.
6. Fee adjustment is available upon proof of Free/Reduced lunch voucher from Stamford Public School system
7. Bounced check will result in a \$10 fee charge
8. Returning players must return Registration form by March 4th to avoid \$10 late fee.
9. Tryouts are Mar 4th or Mar 24th at Westhill High School Freshman Gym. If you cannot make this date, call/email Lee Isenstein 274-6530; playeragent@nlll.com to confirm the alternate tryout date. Players age 7-12 not on a Majors Roster must try out. Please arrive 15 minutes early to receive tryout number.

Tryouts at Westhill High School Freshman Gym	
Mar 4th	Mar 24th
9:00 am – League Age 10	9:00 am – League Age 7
10:00 am – League Age 11	10:00 am – League Age 8
11:00 am – League Age 12	11:00 am – League Age 9

Fees – Payable to National Little League	
Majors (9 – 12)	\$175
Jr. Majors (9 – 12)	\$175
Minors (7 – 8)	\$125
Jr. Minors (6 – 7)	\$100
Tee Ball (4 – 6)	\$85

Board of Directors	
President	Mike Nicholson
Secretary	Dan Young
Treasurer	Chip Howe
Coaching Coordinator	Kevin Hackett
Player Agent	Lee Isenstein
Division Coordinator	Dan McMorrow
Field & Facility Maintenance Officer	Seamus Brennan
Safety Officer	Mark Becue
Equipment Officer	Matt Lueders
Scheduling Officer	Kevin McOsker
Information Officer	Jessica Lee

Signature _____ Date _____