



2018 Registration Form

REGISTRATION FEE:
 \$125.00 - All Divisions
AFTER JAN. 25, 2018
 Add \$25.00 to Each Registration

LEAGUE USE ONLY:

Registrar Initial:	Age according to Little League calendar:	
Residency Verified: <input type="checkbox"/> Yes <input type="checkbox"/> No	Birth Certificate Verified: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Proof #1:	Registration	CHK# \$
Proof #2:	Volunteer Fee	CHK# \$
Proof #3:	Total: \$	
Volunteer Code:		

Option 1: Type info into form using Adobe Reader. Print and bring form to Registration with 3 forms of Proof of Residence and Birth Certificate (copy and original).
 Option 2: Print form and fill out all required fields clearly. Bring form to Registration with 3 forms of Proof of Residence and Birth Certificate (copy and original).

*Player Name:		Date:
*Birth Date:	*Age according to Little League calendar:	Check One: <input type="checkbox"/> Male <input type="checkbox"/> Female
*Did he/she play for PLL last season: <input type="checkbox"/> Yes <input type="checkbox"/> No	*If yes, Division and Team Name:	
*Parent/Guardian Name:	*Home Phone:	*Cell Phone:
*Relation:	*Email:	
*Address (Street, City, Zip):		
Parent/Guardian Name:	Home Phone:	Cell Phone:
Relation:	Email:	
Address (Street, City, Zip):		
*Best Phone Number to Contact You by Coach:	*Email to be listed in PLL Roster Book: <input type="checkbox"/> Do not list my Email	

*Shirt/Jersey Size:	
---------------------	--

Division Requested:

<input type="checkbox"/> Juniors ages 13-14	<input type="checkbox"/> Majors ages 11-12	<input type="checkbox"/> AAA Minor ages 9-10
<input type="checkbox"/> AA Minor ages 7-8	<input type="checkbox"/> A Minor ages 6-7	<input type="checkbox"/> T-Ball ages 5-6

T-Ball Only-Coach/Player Request:

Note: Placement of all players will be determined by PLL. Player's eligibility is subject to verification of age and residency.

* =mandatory information



Player Name: _____

Parent/Guardian Responsibility Agreement

1. I/We, the parent(s) or guardian(s) of the above named candidate for a position on a PLL team, hereby give my approval for his/her participation in any and all Little League activities, including transportation to and from the activities during the current season.
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 PLL, Little League Baseball, Inc., 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 will be required to try out for a team. If he/she does not attend at least 50 percent of the tryouts, he/she will be placed on a team, and not eligible for the draft. Junior and Majors ONLY: I understand that if my player does not attend at least 50% of the tryouts, he/she will not be eligible to play. T-Ball is the only division without tryouts and a draft. The final placement of my child on a team is the prerogative of PLL. In the event that my child is selected by any Manager with the concurrence of the Board to play on the designated team or in a higher or lower division that he/she was originally assigned, I will agree to the selection rules set for the by PLL and Little League Baseball, Inc.
4. I/We agree to provide 3 proofs of legal residence (as defined by Little League Baseball, Inc.) and age. I/We understand that our child must be eligible under the residence and age regulations of Little League Baseball, Inc., to participate in PLL, 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 PLL (Abstracts of Birth do not qualify).
6. I/We agree to provide a \$100 volunteer check (payable to PLL). At which time I/we complete a minimum of 8 volunteer hours **plus one snack shack shift** for the league, our check will be returned. If I do not complete my required volunteer time, by June 1, I understand that my volunteer check will be cashed by PLL.
7. I/We hereby give permission to PLL, to use photographs taken for the league in any publication, media release or promotional announcement, electronic or otherwise. I understand that I will not receive any compensation if such image appears in such publication, media release or promotional announcement, electronic or otherwise. I agree that such image is the property of PLL. I understand that PLL, will not supply this image for use in any commercial venture or advertisement not published/produced for/by PLL without my permission.
8. In case of emergency, I hereby authorize by signing below that my child is to be treated by Certified Emergency personnel (i.e. EMT, First Responder, E.R. Physician). In the event of an accident or other emergency, and when a parent/guardian is not available, I hereby authorize the manager/coach to make such arrangements that he/she considers necessary for my child to receive medical and hospital care, including necessary transportation. By signing below, I affirm that I understand the authorization I have executed, that the information provided on this form is accurate, and that I authorize the carrier of this form to seek medical attention in my absence for my above listed child.
9. I/We agree to abide by the Code of Conduct as included in the PLL By-Laws.

Parent/Guardian Signature: _____ Date: _____

Volunteer Support

PLL is a nonprofit organization dedicated to serving the areas youth and families by enhancing the enjoyment of baseball for the players and their families. The league, like any volunteer organization, is dependent upon the support of the participants and their families. Please check any activities where you are willing/able to assist PLL:

- | | |
|--|--|
| Board of Directors | Field Prep Volunteer |
| Team Manager | Snack Shack Volunteer |
| Team Coach | Opening Day Volunteer |
| Team Parent | Volunteer Umpire (T-Ball, AA & A Minor Only) |
| Team Scorekeeper (Major & AAA Only) | Sponsorship |
| Team Pitch Counter (Major, AAA, & AA Only) | Family Fun Day Volunteer |
| Tryout Volunteer | I am unable to Volunteer (Cash my \$100 Volunteer Check) |

If you, as a parent/guardian, have specialized training or skills such as first aid/CPR trainer, plumber, electrician, carpenter, etc., that you are able and willing to provide services to the league, please note them below.

Thank you for supporting Pocket Little League

P.O. Box 22724, Sacramento, CA 95822 | www.pocketlittleleague.com