



P.O. Box 6147, Peoria, AZ 85385

Player Registration Form



Player name		Current Age		D.O.B.	/ /
Address		Player Shirt size	Girls S M L Ladies S M L XL XXL		
Address 2		Jerseys will be available at open registrations & Tryouts to try on.			
City/State/Zip		Registration Fee	\$125		
Contact Phone	()				
Email					
Parent Info	Parent 1	Parent 2			
Name					
Phone	()	()			
Email					

Volunteer If checked, please fill out Volunteer Application If checked, please fill out Volunteer Application

How many Season have you played _____	What is your major position? _____
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Medical Information:

Emergency Contact		Phone	()
Relationship to player			
Insurance Carrier		Policy #	

1. I/We, the parents/guardians of the above-named candidate for a position on a League team, hereby give my/our approval to participate in any and all Little League activities, including transportation to and from activities.
2. I/We know that participation in softball 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 League, DGSA, the organizers, sponsors, supervisors, volunteers, 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 the uniform and/or other equipment issued to my/our child in as good condition as when received except for normal wear and tear.
4. I/We agree that our child (candidate) may be required to try out for a team. If such does not attend at least 50% of the tryouts, local Board-of-Directors approval is required for such candidate to be placed on a team.
5. I/We understand that our child (candidate) may be chosen at anytime to play on a League team, if she is of the correct age for such division as determined by the local league. 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.
6. I/We agree to provide proof of legal residence and age. I/We understand that our child (candidate) must be eligible under the residence and age regulations of the League, to participate in this Local League, and that if in any controversy arises regarding residence and/or age, the decision of DGSA board members will stand final. I/We further understand that if any participant on a League team does not qualify for participation in the league based on residence and/or age, such participant and/or team on which 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 DGSA upon request.

Signature _____ **Date** _____