

2010 - CORVALLIS LITTLE LEAGUE REGISTRATION FORM

| | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| PLAYER | Last Name, First Name | | Phone (primary family) | | League Age _____ |
| | Address | | City, ZIP | | |
| | Birth Date | Gender | School | Grade | |
| Father/Guardian | | Primary Phone | | Softball RookieSB MinorSB MajorSB JuniorSB | |
| Address | | Work Phone | | | |
| City, ZIP | | Mobile Phone | | Birth Certificate _____ Initial Player Fee \$ _____ Donation \$ _____ Total Due \$ _____ Cash/Check \$ _____ \$ _____ \$ Received by _____ Initial Date _____ | |
| Father/Guardian Email | | | | | |
| Mother/Guardian | | Primary Phone | | | |
| PARENT/GUARDIAN INFORMATION | Address | | Work Phone | | |
| | City, ZIP | | Mobile Phone | | |
| | Mother/Guardian Email | | | | |
| | Mother/Guardian | | Primary Phone | | |
| | Address | | Work Phone | | |
| City, ZIP | | Mobile Phone | | | |
| Mother/Guardian Email | | | | | |
| No refunds after March 1 ♦ refunds will be provided for those requesting them on or before March 1 except for Minor, Major, or Junior league players electing to play in another league. For this case, refund requests will only be honored if made on or before February 13. | | | | | |

Note any medical problem or condition the child has: _____

Person to notify in case of emergency
 (if parents/guardians can't be reached): _____
 Name Primary phone Work phone Mobile phone

Doctor to notify in case of an emergency: _____
 Name Phone

Personal insurance provider and policy #: _____

| | |
|-----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Junior Major Minor | Team formation in both Softball and Baseball are done by a draft, and based on talent AND ability. It is just not possible to guarantee that a player will be on a certain team or with a particular coach at these levels, even for siblings (with rare exception). |
| Farm Rookie (BB & SB) T-Ball | Teams are assembled by the level chosen on this form, age, school and grade, a Parent as a Coach or Manager, and then special requests. Every attempt is made to match siblings on teams as well as parents and players. |

Farm, Rookie (BB & SB), T-Ball Special Requests

The undersigned: parent/guardian of the participant, consent to their participation in all Corvallis Little League (CLL) activities; waive, release, absolve, indemnify and agree to hold harmless CLL, Little League Baseball, Inc., organizers, sponsors, supervisors, officers, owners of fields and facilities utilized by the program, and participants and persons transporting my child to and from activities for any claim arising out of an injury to my child resulting from negligence or for any cause except to the extent and in the amount covered by the accident, medical or liability insurance carried by the CLL organization; give my consent and authorization for medical treatment in the event of injury or illness by qualified medical personnel and allow such qualified medical personnel to render such medical care as determined necessary under the circumstances including but not limited to first aid treatment, anesthetics, suture of wounds, X-rays and/or hospitalization.

Signature of parent or legal guardian _____ **DATE** _____