



Mountain View California Little League®

Fall Ball Registration Form

Player name	first <input type="text"/>	last <input type="text"/>	Birthdate	MM <input type="text"/>	DD <input type="text"/>	YYYY <input type="text"/>
Nickname	<input type="text"/>		Gender	<input type="text"/>		
Address	<input type="text"/>					
City	<input type="text"/>	Zip	<input type="text"/>			
School	<input type="text"/>					
Returning Player to MVLL?	<input type="checkbox"/> Returning Player, <input type="checkbox"/> New – no experience, <input type="checkbox"/> New – experienced, or Other		Payment Method	<input type="checkbox"/> PayPal, Check, <input type="checkbox"/> or Cash.		
			Fee	<input type="checkbox"/> Sorry, No Waivers \$ <input type="text"/>		
			Division	<input type="checkbox"/> Minors, Majors <input type="checkbox"/> OK to select both if playing up		
			Tee Size	<input type="checkbox"/> Youth and Adult sizes <input type="checkbox"/> Y-S, Y-M, Y-L, Y-XL <input type="checkbox"/> A-S, A-M, A-L, A-XL		

Parent/Guardian #1		Parent/Guardian #2	
Name	<input type="text"/>	Name	<input type="text"/>
Phone	000-000-0000 <input type="text"/> Type <input type="text"/> <small>Mobile, Home, Work, Other</small>	Phone	000-000-0000 <input type="text"/> Type <input type="text"/> <small>Mobile, Home, Work, Other</small>
Email	<input type="text"/>	Email	<input type="text"/>
Volunteer Job (optional)	<input type="text"/>	Volunteer Job (optional)	<input type="text"/>

Special Requests (teams, coaches, etc.)

Medical Information (A Separate Medical Release Form is required*)		League Use Only	
Emergency Contact	<input type="text"/>	Phone 000-000-0000	<input type="text"/>
Relationship to player	<input type="text"/>	Phone 000-000-0000	<input type="text"/>
Insurance Carrier	<input type="text"/>		
Policy No.	<input type="text"/>		
		* - A signed Medical Release is required to play baseball.	
		Birth Certificate	Payment Type
		Y <input type="checkbox"/> N <input type="checkbox"/>	
		Medical Release Form	Check/MO#
		Y <input type="checkbox"/> Missing <input type="checkbox"/>	<input type="text"/>
		League Eligibility – Method Used	
		Residency <input type="checkbox"/>	School Enrollment <input type="checkbox"/>
		BB Age	Division
		<input type="text"/>	<input type="text"/>
		Team Name	<input type="text"/>

Little League Terms and Conditions

- 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.
- I/We know that participation in baseball or 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 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.
- I/We agree to return upon request the uniform and other equipment issued to my/our child in as good conditions as when received except for normal wear and tear.
- I/We agree that our child (candidate) may be required to try out for a team. If such does not attend at least 50 percent of the tryouts, local Board-of-Directors' approval is required for such candidate to be placed on a team.
- I/We understand that our child (candidate) may be chosen at anytime to play on a Major Division team, if he or she is of the correct age for such division as determined by the local league and Little League Baseball. 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.
- 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. I/We further understand that if any participant on a Little League team does not qualify for participation in the league based on residence (as defined by Little League Baseball, Incorporated) and/or age, such participant and/or team on which he/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.
- I/We will furnish a certified birth certificate of the above-named candidate to League Officials.
- I/We understand that my information as the parent or guardian of such above-named candidate is sent by the local league to Little League International each year. Such use of information by Little League International can be found here: www.LittleLeague.org/privacypolicy. You may opt-out of communications from Little League International at any time.

Signature **To digitally sign, insert your first and last names on the signature line.** **Date**