

Willington Little League Baseball and Softball 2010 Spring Registration Form

Please Note: This is a double-sided form. Please make sure that you fill out both sides and sign the form. Thank you!

Participant Information (Please complete one form for each player)

Information for your child may be pre-filled based on past participation in Willington League programs and the information we have in our database. Please correct any incorrect information and provide any information that is not pre-filled.

Name(first,last): _____ Gender (M=Male;F=Female): _____

Address: _____

Home Telephone: _____ Alternate Phone: _____ Grade _____
Date of Birth: _____ on 4/30/10 (Boys) Age on 12/31/09 (Girls) _____

Mother's Name _____

Address _____ Phone # _____

Father's Name _____

Address _____ Phone # _____

Please provide the email address at which your child's coach can reach you most efficiently, particularly with information about weather cancellations or schedule changes. If you prefer not to be reached by email, please let us know and provide the phone number where we can most easily reach the person responsible for your child's schedule:

Email address: _____ Best telephone number: _____

PARENTS/GUARDIANS - PLEASE READ AND SIGN BELOW...

I understand that I am responsible for transportation to and from games and practices.

I hereby agree to release, indemnify and hold harmless the Willington Little League, Inc. and its coaches, officers, agents, or representatives from any claims arising out of injury to the above-named individual while participating in any activity related to this program. In the event of illness or injury, if it is not possible for the hospital, coach, or the Willington Little League representatives to contact me, my permission is given for medical intervention and, if necessary, the administration of anesthesia for the above-named individual.

Signature: _____ Relationship _____ Date: _____

(Parent/Guardian)

I understand that from time to time the Willington Little League, Inc. may post on its website pictures of its various league activities, and that the pictures of various players may be included but that the players are not identified. I give permission for the League to include my child's picture on its website.

Signature: _____ Relationship _____ Date: _____

(Parent/Guardian)

Emergency/Medical Information

In case of emergency contact:

Name: (other than parent) _____ Relationship: _____

Home Telephone #: _____ Alternate Phone #: _____

Physicians Name: _____ Telephone #: _____

Insurance Carrier: _____ Policy No: _____

Special Health Concerns: Allergies, Medical Conditions & other information: _____

MAKE CHECKS PAYABLE TO : Willington Little League

Registration for the Willington Little League, Baseball and Softball, will be held at Hall School (outside the gymnasium) Saturday, January 16th and Saturday, January 23rd from 10:00 am to 3:00 pm. These dates will be the only opportunity to register.

No mail-in registrations will be accepted. No one will be allowed to play that does not register

Registering players must be accompanied by a parent or guardian. **Players new to the program this year must bring legal proof of age (birth certificate).** These must be original "Birth Certificates", notification of birth registrations, or birth registration cards, or certified copies thereof. The documents will be returned after examination. Returning Players where we have a record that legal proof of age was presented last year do not need to do so again. If your pre-filled form indicates (below) we do not have a record of proof of age, please bring it to registration.

Record of Legal Proof of Age? ___Yes___

Amount Enclosed _____ (\$120.00 family max)

Number of players registered _____ (please fill out a separate form for each child)

Volunteer Information.

Parents,

Please consider coaching or assisting. Assistance is needed in all areas for the League to have a successful season. Please indicate the area or areas in which you are willing to assist:

_____	Manager*	_____	Coach (assistant)*	
_____	Umpire or Coordinator	_____	Opening Day Volunteer	
_____	Field preparation	_____	Instructional Program	
Boys/Girls	_____	Spaghetti Supper	_____	Concession
Stand		_____	Waiter Night	

_____ Team Parent: *EACH TEAM MUST HAVE ONE. Team Parents will be responsible for coordinating concession stand duty with their team. Each team is required to have a list of available volunteers to work the stand when their games are at the Town hall complex. Dates and times will be distributed by the coaches.*

***Managers** must attend a **NYSCA** clinic; assistant coaches are strongly encouraged to attend. Anyone interested in umpiring and/or attending clinics should contact Patrick Ryan at pryan@willingtonlittleleague.org
