# AMERICAN LITTLE LEAGUE 2010 REGISTRATION FORM

Is your child a (please check one): Returning Player_____New Player _____

Child's age on April 30, 2010:_____ Birth Date: _____

Please check the box corresponding with the league you are signing your child up for and include the registration fees as stated.

**Please make checks payable to American Little League.**

- ☐ **T-Ball:** ages: **5 - 6**—$50.00 fee + PPF
- ☐ **Rookie League:** ages **7- 8**—$70.00 fee + PPF
- ☐ **Minor League:** ages **9 -10**—$90.00 fee + PPF
- ☐ **Major League:** ages **11-12**—$90.00 fee + PPF

**Parent Participation Fee (PPF):** $40.00 Deposit – Returned after working concession stand hours.
***A separate check is required for the parent participation fee.***

A certified birth certificate is **required per Little League, Inc.** policy to determine which age bracket your child belongs in. This applies to all new and returning players. **Baptismal and hospital certificates will not be accepted.** Please bring certified birth certificate with you at registration. Proof of birth date will be noted by registrars at time of registration. You **will not** need to leave a copy.

**Office Use Only:**

☐ **Birth certificate presented** ☐ **League fees paid: check#/cash** _____ **PPF check#/cash** _____

**Child's Name:**_____ **Boy/Girl**

**Parent/Guardian Name(s):** _____

**I will volunteer as a:** Head Coach Assistant Coach Team Parent
Board Member Umpire

**Address:**_____ **City:**_____ **Zip:**_____

**Telephone:**_____**School Attended:** _____

**E-mail Address:** _____

*** **Please Note:** This email address **will be used** by league to contact familes. ***

☐ Please check here if you **DO NOT WANT** to receive emails from the Eau Claire Express regarding news stores, upcoming promotions and special events scheduled for the 2010 season.

Last Name
First Name
League
Team
(Office use Only)

## *** EAU CLAIRE AREA YOUTH BASEBALL HAS A NO-CUT POLICY ***

### Youth Baseball Player Waiver

We, the parents of the child named above, hereby give our approval for his/her participation in any and all activities of the Eau Claire Area Little League during the current season. We assume all risk and hazards incidental to the conduct of the activities and transportation to and from activities. We do further hereby release, absolve, indemnify, and hold harmless the Eau Claire Area Little League; Little League Baseball, Inc.; organizers; sponsors; officers and supervisors, any and all of them. We likewise release from responsibility any person transporting our child to or from activities. This form must be signed by a parent or guardian.

☐ I allow the American Little League to use photos of my son/daughter on league publications.

_____ _____

Signature Date

**Please mail this form by February 27, 2010 to:**
Eau Claire Express
108 East Grand Avenue
Eau Claire, WI 54701

**Or stop in at these times:**
February 22-26 (M-F) 9:00 a.m.—7:00 p.m.
February 27 (Saturday) 9:00 a.m.—2:00 p.m.

**Please Note:** Registration form must be received by February 27th 2010 to assure your child's placement on a team.
T-Ball registration will be accepted through May 1st.