

2010 CONFEDERATION PARK LITTLE LEAGUE

REGISTRATION TO PLAY CHALLENGER BASEBALL

PLAYER NAME: _____ TEL. _____
Last name First Name

EMAIL: _____ Played last year: _____
[Please print] *Edmonton Little League will not provide this to anyone* yes/no

BIRTH DATE: _____ LEAGUE AGE: _____
(Month) (Day) (Year) (Age on April 30, 2010)

ADDRESS: _____ POSTAL CODE _____ - _____

T-SHIRT Youth M: _____ Youth L _____ Men S _____ Men M _____ Men L _____ Men XL _____

WHERE DID YOU FIND OUT ABOUT BASEBALL REGISTRATION?
Banners _____ Journal _____ Newsletter _____ Boulevard Sign _____ Internet _____

We need your help-

Coaching _____ Tel # _____

I want to be a Buddy _____ Tel # _____

REGISTRATION FEES \$50

UNIFORM TOP SUPPLIED BUT MUST BE RETURNED AFTER THE LAST GAME OF THE SEASON

C

As a parent/guardian of the above candidate for admission into Little League, I hereby give my approval for his/her participation in all league activities, recognizing that there are certain risks and hazards associated with this participation. I also give my approval for his/her placement on a team that best suits their ability and skills.

I will allow a picture of my child to be placed in newspapers and other sport news promoting baseball.

I ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF MY RECEIPT/LEAGUE SAFETY RULES, AND UNDERSTAND THAT IT IS MY RESPONSIBILITY AS A PARENT TO:

- ENSURE THAT I UNDERSTAND THESE RULES
- REVIEW THEM WITH MY SON/DAUGHTER TO ENSURE THEY UNDERSTAND
SUPPORT MY SON/DAUGHTER COMPLYING WITH THESE RULES DURING ALL
ACTIVITIES ASSOCIATED WITH THE LITTLE LEAGUE PROGRAM.

PARENT OR GUARDIAN, PLEASE PRINT NAME: _____

SIGNED: (PARENT OR GUARDIAN) _____

