LAGUNA LITTLE MISS KICKBALL

2012

REGISTRATION FORM

PLEASE PRINT CLEARLY AND COMPLETE ALL ITEMS IN PEN

Player Name		
Address		
City **ST** **Zip**		
Home Phone	**Cell Phone**	**Date of Birth**
Age as of 8-31-2012	**What Team Were You On Last Year?**	
Email address:		

Parents are able to volunteer for the following:

Coach Concession Field Maintenance Umpire Scorekeeper

Team Parent Board Member Sponsor

Lives with? **Mother Father Both Parents Guardian**

Father/Guardian Name	**Home Phone**
Address	**Work Phone**
City **Zip**	**Cell Phone**
Mother/Guardian Name	**Home Phone**
Address	**Work Phone**
City **Zip**	**Cell Phone**

Are there any special needs for your child? YES NO

For League Use Only

Division	**Returning Team**

Playing Age as of 8-31-2012

4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

Registration Status Regular Late	**Draft Status** Returning Player-NO TRYOUT
Option Status CO SO Other _____	Moving Up Request Draft New Player

Additional Notes:

Birth Certificate on File Yes No	**Draft #**

Registration Fees

Total Fee:		Receipt # Date:
Paid:		CASH CHECK#
Balance Due:		League Official:

Please describe those needs:

Person to contact in case of an emergency: **Phone Number:**

Sisters presently at Laguna Little Miss Kickball

UNIFORM SHIRT SIZE:

YOUTH	ADULT
YSMALL YMEDIUM YLARGE ADULT SMALL	**SMALL MEDIUM LARGE X-LARGE XX-LARGE**

Parental/Guardian Consent

I/We, the parents and/or guardian of the child named above as a candidate for a position on a league team, hereby give **my/our** approval to participate in any and all league activities. **I/We** assume all risks and hazards incidental to such participation and activities, including transportation to and from such activities. **I/We** do hereby waive, release, absolve, indemnify, and agree to hold harmless the this league, the chartering organization (**Little Miss Kickball International, Inc.**), the City the League resides, the organizers, sponsors, supervisors, participants, and persons transporting **my/our** child to and from activities, for any claim arising out of an injury to **my/our** child, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident and liability insurance. **I/We** understand that the insurance carried by this league covers only the amount that is not paid by **my/our** carrier. **I/We** agree to pay to **the League** any, and all, registration and uniform fees in the amount determined in accordance with the fee schedule. **I/We** will furnish a certified birth certificate for the above named candidate to league officials prior to the start of the playing season.

Parent/Guardian Signature: _____

Photography/Video Release

I/We, **DO / DO NOT** (Circle One) give permission for my/our child to be included in photographs, and/or videotape productions for the purposes of event-sponsored publications, multimedia presentations, and for display on a password-protected website where the images may be made available for purchase

Parent/Guardian Signature: _____