

**PELHAM LITTLE LEAGUE**

P.O. Box 8203

Pelham, NY 10803

[www.pelhamlittleleague.org](http://www.pelhamlittleleague.org)

**2019 Registration**

**January 12, 2-5pm and February 2, 9-12noon**

**DARONCO TOWN HOUSE**

Cost: \$150 per player, a \$50 late fee will be added if not registered by February 10th  
Make checks payable to Pelham Little League.

**Late Registrants are subject to be put on a waiting list.  
Registrant must reside in or attend Pelham Schools.**

Eligibility: Players must be 4 years old by 12/31/18 in order to register.  
New Players to PLL- Please bring a copy of child's Birth Certificate to registration.

**Please Print Clearly**

Players Name: \_\_\_\_\_  
(Last) (First)

Address: \_\_\_\_\_  
(Number/Street/Apt#)

Home Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Gender:  M or F  Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ First time player:  Yes or No   
New Players to PLL- Please bring a copy of child's Birth Cert. to reg.

School Attending: \_\_\_\_\_ Current Grade : \_\_\_\_\_

Father: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
(Name)

Mother: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
(Name)

Emergency: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
(Name)

Is there any medical or physical condition that we should be aware of while supervising your child?

**Please list other sports that your child participates in during the Little League season:**

I, the undersigned parent/guardian, understand that participation in PLL T-Ball, Baseball or Softball may result in injury and that protective equipment does not prevent all injuries. I hereby agree to waive, release, absolve and hold harmless the PLL, the organizers, directors, sponsors, administrators, coaches and participants for liability from any claim arising out of the injury or illness to my child whether the result of negligence or for any other cause while a participant in PLL. I understand that PLL insures each participant for the season. Any claim made to PLL must be reported to a director within 48 hours of the incident. I also give Pelham Little League permission to use my child's photograph on their web site or in the local newspapers/on line publications.

\_\_\_\_\_  
Date Please Print  
\_\_\_\_\_  
Signature

**PLL NEEDS VOLUNTEERS FOR ALL PHASES OF OPERATIONS!! Please circle preference below.**

Name: \_\_\_\_\_ SPONSOR MANAGER (Head Coach) ASST COACH PARENT HELPER

New "Little League Baseball" rules require background checks on all volunteers.

All Coaches will be required to attend coaching clinics.

League use only :

League: \_\_\_\_\_ Paid: \_\_\_\_\_

Mandatory REC dept hold harmless for all players: [http://pelhamrecreation.com/pdf/Pelham\\_Recreation\\_Registratio](http://pelhamrecreation.com/pdf/Pelham_Recreation_Registratio)

Back ground check, mandatory for all volunteers (managers, assistant coaches ect):  
[http://www.littleleague.org/Assets/forms\\_pubs/VolunteerApplication16.pdf](http://www.littleleague.org/Assets/forms_pubs/VolunteerApplication16.pdf)

: