



Fairfax Fletcher Westford Little League



2018 Registration Form

Player Name		Date of Birth	/ /
Address		School/Grade	
Phone		Gender M or F	Age

Division (circle) **Baseball** Teeball (5/6) Farm (7/8) Minors(9/11) Majors(11/12)

Softball

Farm (7/8) Minors (9/11) Majors (11/12)

*We have added a farm softball division. If there are not enough girls to form a farm level softball team, girls age 7-8 will be assigned to a farm baseball team.

If selected, would your child be interested in participating in JUNE/JULY All Stars (LL Ages 9-12 Only) Y or N

Parent Information (Please indicate best phone number for One Call Notifications)

Parent #1		Phone		Cell	
Address		1Call		Email	
Parent #2		Phone		Cell	
Address		1Call		Email	

Volunteer Info (circle)

Parent 1: Y or N

Parent 2: Y or N

In What Capacity? (circle) Manager / Coach / Umpire Please Indicate Shirt Size:

ALL Volunteers Must complete 2018 Volunteer Application/Background Check Form

Player Uniform Size (Teeball Shirt Size Only) Circle Size Choices (socks run large)

Shirt	YS 6-8	YM 10-12	YL 14-16	AS 34-36	AM 38-40	AL 42-44	AXL 46-48
Pants (waist)	YS 20"-22"	YM 24"-26"	YL 28"-30"	AS 28"	AM 30"	AL 33"	AXL 37"
Socks	YS 7-9		M 9-11		L 10-13		

Major Level Only: Indicate three favorite Shirt #'s _____

NOTES: 1. Mouthguards are Required for all practices and games.

2. All Male Players, Farm Level and up are Required to wear a protective cup and supporter.

Permission

1. I/We, the parents of the above mentioned player on a Little League team, hereby give my/our approval to any and all Little League activities, including but not limited to: practices, games, transportation to and from activities, and participation in fundraising events.
2. I/We know that participation in baseball or softball may result in serious injuries and that protective equipment does not prevent all injuries to players. I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the local Little League, Little League Incorporated, the organizers, sponsors, supervisors, participants, person(s) transporting my/our child to and from activities, coaching or supervising, from any claim arising out of an injury to my/our child whether the result of negligence or any other cause, except to the extent and in the amount covered by accident or liability insurance.
3. I/We will furnish a certified birth certificate of the above mentioned player to the league upon request.

Parent/Guardian Signature_____

Date:_____

Mail To: **FFWLL PO Box 51 Fairfax, VT 05454**

Registration Fee Payable to FFWLL: \$45 Tee Ball, \$65 All Other Levels, or \$140 max/family

Registrations must be Received or Post Marked by March 1st!

NO LATE REGISTRATIONS WILL BE ACCEPTED!