



LOUDOUN GIRLS LITTLE LEAGUE SOFTBALL

*We offer instruction, skills building and **FUN!***

Fall 2010 Registration

For all girls ages 4 - 18 (born on or between the dates of January 1, 1991 and December 31, 2005)
Take advantage of our Early Bird Registration special by 7/15/10 and pay only \$75!
Regular registration fee is \$90 (and late fee of \$110 applies after 8/15). These fees each include a County imposed sports fee of \$10 per player.

Mail completed forms, copy of birth certificate and checks to: LGLLS, P.O. Box 3308, Leesburg VA 20177. For more information or to register online visit www.loudounsoftball.org today!



Player's Information

Name _____		Date of Birth _____	
Street Address _____		City _____	State _____ Zip _____
Home Phone _____	Current School _____	Previous Softball Experience _____	

Mother's Information

Name _____	Cell Phone _____	Email _____
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Father's Information

Name _____	Cell Phone _____	Email _____
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Volunteers

Loudoun Girls Little League Softball is run **entirely** by **volunteers**. We ask that each family **PLEASE** volunteer in at least one capacity: **We are currently seeking new board members to fill open positions! Keep the league strong and volunteer!**

Head Coach/Manager	Assistant Coach	Umpire	Fund Raising/Events	Board Member
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Loudoun Girls Little League Softball is required by Little League Baseball, Incorporated, to conduct background checks for all board members, managers, coaches, and volunteers who provide regular service to the league and/or have repetitive access to or contact with the players. **** All volunteers must fill out a Little League Volunteer Application and submit a copy of a valid VA driver's license. ****

Medical Information

Emergency Contact Name _____	Phone _____	Relationship _____
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Pediatrician's Name _____	Phone _____	Insurance Carrier _____
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Known Medical Conditions (allergies, medications, etc.) _____

In which division do you wish your child to participate? See age/division chart on next page. Only experienced players may be placed in a higher division. _____

For League Use Only

Fee	Check #	Received By	Date				
Birth Certificate Verified By		Proof of Residence Verified By					
Siblings	Returning Player Y/N			Placement requests			
League Age:	5 (2004)	6 (2003)	7 (2002)	8 (2001)	9 (2000)	10 (1999)	11 (1998)
	12 (1997)	13 (1996)	14 (1995)	15 (1994)	16 (1993)	17 (1992)	18 (1991)
Division:	Tee Ball (5-6)	AA Minors (7-8)	AAA Minors (9-10)	Majors (11-12)	Juniors/Seniors (13-18)		

Please Read and Sign:

1. I/We, the parents/guardians of the above-named candidate for a position on a Little League team, hereby give my/our approval to participate in any and all Little League activities, including transportation to and from the activities.
2. I/We know that participation in softball may result in serious injuries and protective equipment does not prevent all injuries to players, and do hereby waive, release, absolve, indemnify, and agree to hold harmless the Loudoun Girls Little League Softball, Little League Baseball, Incorporated, the organizers, sponsors, supervisors, participants, and persons transporting my/our child to and from activities from any claim arising out of any injury to my/our child whether the result of negligence or for any other cause.
3. I/We agree to return upon request any equipment issued to my/our child in as good condition as when received except for normal wear and tear.
4. I/We agree that our child (candidate) may be required to try out for a team. If such does not attend at least 50 percent of the tryouts, local Board of Directors' approval is required for such candidate to be placed on a team.
5. I/We understand that our child (candidate) may be chosen at anytime to play on a Major Division team, if he or she is of the correct age for such division as determined by Loudoun Girls Little League Softball and Little League Baseball. Declining to move up to such Major Division team will result in forfeiture of eligibility for the Major Division for the current season, and may be subject to further restrictions by the league.
6. I/We agree to provide proof of legal residence (as defined by Little League Baseball, Incorporated) and age. I/We understand that our child (candidate) must be eligible under the residence and age regulations of Little League Baseball, Incorporated, to participate in this Local League and that if any controversy arises regarding residence and/or age, the decision of the Charter Committee in Williamsport shall be final and binding. I/We further understand that if any participant on a Little League team does not qualify for participation in the league based on residence (as defined by Little League Baseball, Incorporated) and/or age, such participant and/or team on which he/she participates be found ineligible, and forfeit(s) and/or suspension of Tournament privileges may be decreed by action of the Charter Committee or Tournament Committee.
7. **I/We am including a certified birth certificate of the above-named candidate to League Officials.**
8. I/We authorize Loudoun Girls Little League Softball the authority to have our child treated in case of an emergency (injury, illness, etc.) when I am/we are unavailable to authorize such emergency treatment. If family physician cannot be reached, I/we authorize our child to be treated by Certified Emergency Personnel. (e.g., EMT, First Responder, E.R. Physician).
9. **I/We understand that NO refunds will be honored after 8/15/10. All refunds given are subject to service fees.**

Parent's Signature

Date

Player's T-Shirt size **YS (6-8) YM (8-10) YL (10-12) AS AM AL AXL**

*** If in doubt, order one size larger!

How did you hear about LGLLS? _____

