



RUTHERFORD LITTLE LEAGUE, INC.

P.O. Box 427, Rutherford, NJ 07070-0427

Application to Play

Little League BASEBALL

2010 Season

PLAYER'S NAME

Last		First		DATE OF BIRTH	
				Mo.	Day
				-	-
					Year

STREET ADDRESS

HOME TELEPHONE NO.

_____-_____-_____-_____

Rutherford, NJ 07070

Player bats: Left Right Both Throws: Left Right

I, the Parent / Legal Guardian of the above named candidate for a position on a Rutherford Little League Major, Minor, or Tee Ball team, hereby give my approval to participate in any and all Little League activities. I assume all risks and hazards incidental to such participation including transportation to and from the activities, and I do hereby waive, release, absolve, indemnify and agree to hold harmless the Rutherford Little League, Inc., Little League Baseball, Inc., the organizers, sponsors, supervisors, participants and persons transporting my child to and from activities, for any claim arising out of injury to my child, whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance. I understand that Little League Accident Insurance coverage is supplemental to any and all family and individual insurance plans. I am familiar with the sport of baseball and, to the best of my knowledge, my child is physically able to participate in this sport.

I agree to assume the responsibility for providing an athletic supporter (male child only) and insuring that said athletic supporter will be worn during all practices and games. I agree to return, upon request, the uniform (shirt, pants and socks) and other equipment issued to my child in as good a condition as when received except for normal wear and tear. I will furnish a legal Certificate of Birth of the above named candidate to the Board of Directors of the Rutherford Little League, Inc., upon request. I certify that the player named on this application lives within the boundaries of the Borough of Rutherford, Bergen County, New Jersey, at the time of initial application.

I am aware that the Rutherford Little League, Inc., offers to all players the use of a batting helmet with a face guard while batting, running the bases, or coaching the bases during games and practices, and that the wearing of such helmets is mandatory for all Tee Ball and Minor League players. If my child was selected to a Major League team in 2008 or earlier, I will be given the opportunity to permit my child to wear a helmet without a face guard. This permission must be renewed every year my child is on a Major League team.

This player application enrolls my child for the 2010 season, from September 2009 through December 2010. However, if my child must be evaluated for the 2011 Major League season, a new player application must be completed for the 2011 season at the time of evaluations.

X _____ - 2009
SIGNATURE OF PARENT OR LEGAL GUARDIAN Today's Date

Mother Father Other (specify) _____

Parent's E-Mail Address (for team/league use only) _____

Examples: john_doe@my.isp.com, JohnDoe123@aol.com

ADDITIONAL INFORMATION

NOTE: League Age is the player's age on April 30 of the playing year. For the 2010 season, players must be born from May 1, 1997, to April 30, 2005. Players born May 1997 through April 1998 are league age 12, etc.