



WEBSTER LITTLE LEAGUE CHALLENGER BASEBALL PLAYER REGISTRATION APPLICATION



FAMILY INFORMATION

Family Name: _____ Address: _____
 Home Phone: _____ City/Town: _____ Zip: _____
 Family E-Mail Addresses: _____
 Parent/Guardian #1 Name: _____ Parent/Guardian #2 Name: _____
 Parent/Guardian #1 Cell #: _____ Parent/Guardian #2 Cell #: _____
 Emergency Contact Person: _____ Emergency Contact Phone #: _____

PLAYER INFORMATION

Last Name: _____ First Name: _____ Nickname: _____
 Date of Birth: ___/___/___ Height: _____ Weight: _____ Gender: _____ School: _____
 Player's Challenge: _____
 Special Needs _____

RELEASE OF LIABILITY

I hereby give my/our approval to participate in any and all Little League activities. I/We know that participation in Little League Baseball, Softball or Challenger Baseball 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 local Little League, 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 injury to my/our child whether the result of negligence or for any other cause.

Authorized Parent/Guardian

Signature Date

**Please Make Registration Fee of \$25 payable to: WAA Baseball and
 Mail to: Webster Challenger Baseball C/O Ron Kampff
 878 Shoemaker Rd.
 Webster, NY 14580**

MEDIA RELEASE

I hereby give my/our approval: To Webster Little League to take photographs and videos of me (the player) and my family in connection with Challenger Baseball games and events. I authorize Webster Little League, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I hereby deny my/our approval:

I hereby give my/our approval: to Webster Little League to use such photographs and videos of me (the player) with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I hereby deny my/our approval:

Authorized Parent/Guardian

Signature Date

