

Southern Cayuga Sports Conference

Little League- 2012 Registration

T-Ball games scheduled with Union Springs teams.

Baseball & Softball games will be played with the Northern Little League (NCLL) teams. NCLL is made up of teams from Cato, Jordan-Elbridge, Port Byron, Skaneateles (Softball Only), Union Springs & Weedsport

Baseball & Softball schedules will be available on www.ncllbaseball.com (upon completion)

PRINT FIRMLY AND CLEARLY – SIGNATURES REQUIRED

[] [] []

Player's Last Name First Male/ Female

Street Address

City State Zip

Date of Birth: _____ _____ Baseball Age

Month / Day / Year

School District _____ Grade _____ Years Played _____

Parent/Legal Guardian Phone # Cell #

Parent/Legal Guardian Phone # Cell #

E-Mail Address

Level of Play : *Subject to change based on Registration Numbers. We have the option to combine at any level w/ a Unions Springs team if SC does not have enough players.*

T-Ball (Ages 4-6) []
Pony (Ages 7&8) []

SOFTBALL	BASEBALL
<input type="checkbox"/> Girls Minors (Ages 8,9&10)	<input type="checkbox"/> Boys Minors (Ages 9&10)
<input type="checkbox"/> Girls Majors (Ages 10,11&12)	<input type="checkbox"/> Boys Majors (Ages 11&12)
<input type="checkbox"/> Girls Junior (Ages 13-16)	<input type="checkbox"/> Boys Junior (Ages 13-16)

Players can move up one level, depending on age & registration #'s.

HOW TO DETERMINE YOUR CHILD'S BASEBALL/SOFTBALL AGE:

- Boys Baseball: Child's age on May 1, 2012
- Girls Softball: Child's age on January 1, 2012

UNIFORM SHIRT/HAT SIZE – Circle

Youth Shirt: Small(6-8)/Med(10-12)/Large(14-16) Youth Hat/Adult Hat
Adult Shirt: Small/Med/Large/Extra Large

IMPORTANT: I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the Little League, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with Baseball/Softball and in consideration for the South Cayuga Little League (SCLL) accepting the registrant for its Baseball/Softball programs and activities (the "Program"), I hereby release, discharge and/or otherwise indemnify the SCLL, its affiliated organizations and sponsors, and their employees and associated personnel, including the owners of fields and facilities utilized for the Programs, against any claim by or on behalf of the registrant as a result of the registrant's participation in the Programs and/or being transported to or from the same, which transportation I hereby authorize.

Name _____
Parent/Legal Guardian (Please Print)

Signature X _____

PARENT CODE OF CONDUCT

As the parent or legal guardian of the above-named player, I hereby state that I have read the Little League Parent Code of Conduct (available at ncllbaseball.com/local rules) and agree that I and my guests will abide by the Little League Code while in attendance at any Little League game, practice or function. Failure to comply with this Code of Conduct will result in expulsion from all Northern Cayuga Little League complexes. A signature is required in order for a minor to participate in Little League.

Signature of Parent/Guardian X _____

SPONSOR

WOULD YOU LIKE TO SPONSOR A TEAM? [] Yes [] No

Please include \$150 Sponsor Fee, Sponsor Name _____

REGISTRATION

~ FEES ~

\$45 first Player, Additional Players (same family) \$40
If postmarked after Feb 24, 2012 additional \$5 fee

<p>Mail Completed Forms with Payment to: Jodi Bennett 1956 Sherwood Rd. Aurora, NY 13026</p> <p>Mail-in Deadline: Feb 23, 2012</p> <p>Questions please call: Jodi Bennett 364-3500</p>	<p><i>Game days listed are the primary days games will be attempted to be scheduled. Games, including rainouts and rescheduled games, may be scheduled on alternate days and weekends based on field availability.</i></p> <p>T-Ball Tues/Fri Pony League Sat + a weekday Girls Minor Tues/Thurs Girls Major Mon/Wed Boys Minor Tues/Thurs Boys Major Mon/Wed</p> <p><small>*Practices will be scheduled by coaches.</small></p>
---	--

Checks Made Payable To: Southern Cayuga Sports Conference
**** Copy of birth certificate required, unless already on file.**

COACHING & UMPIRES

[] Yes – I would like to be a Coach (Name) _____

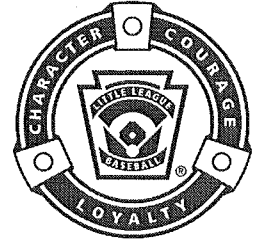
[] Yes – I would like to assist with fields (Name) _____

[] Yes – Assist with fundraising (Name) _____

IF SELECTED
ADULT SHIRT SIZE – Circle One - S/ M / L / XL / XXL / XXXL



Little League. Baseball and Softball M E D I C A L R E L E A S E



NOTE: To be carried by any Regular Season or Tournament Team Manager together with team roster or eligibility affidavit.

Player: _____ Date of Birth: _____ Gender (M/F): _____

Parent (s)/Guardian Name: _____ Relationship: _____

Parent (s)/Guardian Name: _____ Relationship: _____

Player's Address: _____ City: _____ State/Country: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Mobile Phone: _____

PARENT OR GUARDIAN AUTHORIZATION:

In case of emergency, if family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel. (i.e. EMT, First Responder, E.R. Physician)

Family Physician: _____ Phone: _____

Address: _____ City: _____ State/Country: _____

Hospital Preference: _____

Parent Insurance Co: _____ Policy No.: _____ Group ID#: _____

League Insurance Co: _____ Policy No.: _____ League/Group ID#: _____

If parent(s)/guardian cannot be reached in case of emergency, contact:

Name Phone Relationship to Player

Name Phone Relationship to Player

Please list any allergies/medical problems, including those requiring maintenance medication. (i.e. Diabetic, Asthma, Seizure Disorder)

Medical Diagnosis	Medication	Dosage	Frequency of Dosage

Date of last Tetanus Toxoid Booster: _____

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.

Mr./Mrs./Ms. _____
Authorized Parent/Guardian Signature Date:

FOR LEAGUE USE ONLY:

League Name: _____ League ID: _____

Division: _____ Team: _____ Date: _____

WARNING: PROTECTIVE EQUIPMENT CANNOT PREVENT ALL INJURIES A PLAYER MIGHT RECEIVE WHILE PARTICIPATING IN BASEBALL/SOFTBALL.
Little League does not limit participation in its activities on the basis of disability, race, color, creed, national origin, gender, sexual preference or religious preference.