

East Stroudsburg North Little League



Registration 2010 Spring Girls Softball

For all residents of ES North School District. Games played at Resica Elementary School, East Stroudsburg North Campus and Lehman Township fields. **Must be 9 years old before December 31st 2009** for little league baseball.

Register

The following documents are needed:

- Registration form completely filled out and signed by a parent or guardian
- Copy of original birth certificate
- Copy of Health Insurance card
- \$75.00 registration fee per child made payable to East Stroudsburg North Little League. Family discount for 3rd, 4th, child of \$50.00 per child.
- Each family will need to purchase a mandatory \$25 Fundraiser Raffle book of 5 tickets to be paid by April 1st. Tickets can be kept or resold for \$5 each.

Visit us On-Line at www.ESNLL.com

Just print out the online form, complete it along with the above mentioned documents and mail it to the following address or bring it to a scheduled registration date:

E.S.N.L.L.
P.O. Box 241
Bushkill, PA 18324

Questions? Call Ken Miller @ 610-390-6629 or
Tom Marchesani @ 610 -554-5020 or Bob Marx @ 570-994-3986

East Stroudsburg Little League Girls Softball
9- 10yr olds Minors 11-12yr old Major 13-16yrs Senior Division

East Stroudsburg North Little League Registration Form - Softball

Player Information:

Child's First Name: _____ Last Name _____

Address _____ City / Zip Code _____

Birth date ____/____/____ Age on Dec 31, 2009 _____

Insurance Plan _____ Insurance # _____

League age group Minors 9-10 yrs, Majors 11-12, Senior 13-16yrs (Please Circle One)
Team currently on _____

Proof of age _____ Shirt Size Kids – Sm, Md, Lg or Adults – Sm, Md, Lg

Proof of Residency: (Copies)

1. _____
2. _____
3. _____

Parent\Guardian Information:

Father _____

Phone _____

Mother _____

Phone _____

Email Address(s) _____

Payment:

Check or Cash (Please Circle One) Check # _____
Returned Check Fee of \$35

Raffle Books

Payment received (YES or NO) If yes, Board Member Signature here: _____

Volunteers:

Coach _____ Assistant Coach _____ Concessions _____

Umpire _____ Base Umpire _____ Field Prep _____

Score Keeper _____ Fund Raiser _____ Team Parent _____

Please read and sign below:

I, the parent of the above named candidate for a position on a Little League team, give my approval to my child to participate in all Little League activities including transportation to and from activities.

I know that participation in baseball may result in serious injuries and that protective equipment does not prevent all injuries to players and do hereby waive, release, absolve, indemnity, and agree to hold harmless the local Little League, Little League baseball Inc., the organizers, sponsors, supervisors, participants and persons transporting my child to and from activities for any claim arising out of any injury to my child whether the result of negligence or for any other cause, except to the extent and the amount covered by accident and liabilities insurance.

We agree to return any uniform or equipment issued to my child in as good as condition as when it was received except for normal wear and tear. I will furnish a birth certificate to the league officials to verify my child's age.

We understand that Little League insurance pays only after all personal / other insurances on the player have paid their total coverage amount for the amount.

Parent / Guardian _____ Date _____

Parent / Guardian _____ Date _____