



Rancho Cordova Little League
2008 Spring League
Registration Form

LEAGUE & TEAM PLACEMENT	LEAGUE AGE
Tball Coast Amer Natl Major Jr Team _____	

PLEASE PRINT CLEARLY IN ALL WHITE SECTIONS

PLAYER INFORMATION	
Last Name _____	First Name _____ Birth Date ____/____/____
Address _____	<input type="checkbox"/> Male <input type="checkbox"/> Female
City _____	State ____ ZIP _____ Phone _____
PARENT/GUARDIAN INFORMATION	
Primary Name _____	Relation _____ Occupation _____
Email _____	Phone _____ Cell _____
Secondary Name _____	Relation _____ Occupation _____
Email _____	Phone _____ Cell _____
MEDICAL INFORMATION	
Height _____	Weight _____ Glasses/Contacts Required? Yes / No
Significant past illnesses or injuries _____	
Medical problem or prohibition _____	
Alternate Emergency Contact _____	Relation _____ Phone _____
Physician _____	Phone _____ Medical Insurance & Record # _____
CONSENT FOR MEDICAL TREATMENT (MINOR)	
As the parent or legal guardian of the above named player, I hereby give consent for emergency medical care prescribed by a duly licensed Doctor of Medicine or Doctor of Dentistry. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my dependent.	
Parent/Legal Guardian Signature <input checked="" type="checkbox"/> _____ Date ____/____/____	
LEAGUE INFORMATION	
<input type="checkbox"/> T-Ball <input type="checkbox"/> Coast <input type="checkbox"/> American <input type="checkbox"/> National <input type="checkbox"/> Major <input type="checkbox"/> Junior T-Ball&Coast(\$55) Others(\$90 regular,\$75 early) Shirt Size Youth – S M L Adult – S M L XL \$10 discount per additional player	
# Prior Seasons Played _____ Last Season _____ Last League _____ Last Team _____	
Parental Support - <input type="checkbox"/> Manage/Coach <input type="checkbox"/> Snack Bar <input type="checkbox"/> Field Maintenance <input type="checkbox"/> Umpire <input type="checkbox"/> Scorekeeper	
Special Requests _____	
<i>Team/manager/player requests will be accommodated if possible for T-Ball & Coast. There are tryouts and a draft for American through Junior.</i>	
ACKNOWLEDGEMENTS	
By signing this application form and registering your child for the Rancho Cordova Little League, you are granting the use of your child's name and/or picture for publication in local newspapers, magazines and on the RCLL website.	
By signing this application form and registering your child for the Rancho Cordova Little League, you are acknowledging that you and your child will follow and abide by all rules governing RCLL and Little League as well as the Code of Conduct posted on the RCLL website as well as that on the National Little League website. Breaking any of these rules will result in disciplinary action by the RCLL board, up to and including dismissal from the league.	
I/We, the parent/guardian of the registrant, a minor, hereby give my/our approval to participate in any and all Little League activities including transportation to and from the activities. I/We acknowledge that participation in baseball may result in serious injuries and that protective equipment does not prevent all injuries, and do hereby waive, release, absolve, indemnify any official, supervisor, volunteer, participant and/or person transporting the registrant in the case of injury.	
A \$50 deposit is collected per family and will be returned to you upon 6 hours of volunteer work during the 2008 Spring season. Scheduled and verified snack bar, field maintenance, umpire and scorekeeping activities qualify for credits against your balance at the rate of \$8.33 per hour. Funds for any/all incomplete volunteer hours after the last game of the regular season are considered a donation to the league and will not be returned to you. Contact league officials for scheduling, time tracking and refund info.	
If your check is returned due to insufficient funds, you must pay the registration fee plus the \$25 NSF fee by March 15 th .	
The person signing this form is responsible for payment. Initial <input checked="" type="checkbox"/> _____	
Parent/Legal Guardian Name (print) _____	
Parent/Legal Guardian Signature <input checked="" type="checkbox"/> _____ Date ____/____/____	
LEAGUE USE	
<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Residency <input type="checkbox"/> Waiver
Verified By _____	Date ____/____/____
Payment \$ _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ Status _____ Fee _____
Received By _____ Date ____/____/____	
Volunteer Deposit <input type="checkbox"/> Donate <input type="checkbox"/> Work	Refund \$ _____ Date ____/____/____
Notes _____	