

Silvis/United(EM) Little League

IMPORTANT MUST HAVE

NEED THE BELOW FOR REGISTRATION!

******* YOU WILL NEED EITHER ONE FORM FROM EACH GROUP 1,2,3 BELOW **OR** HAVE THE SCHOOL ENROLLMENT FORM FILLED OUT BY YOUR PLAYERS SCHOOL.

RESIDENCY SHALL BE ESTABLISHED AND SUPPORTED BY:

Documents containing the full residence which includes **parent(s) or court-appointed guardian(s) name, street address, city, state, and zip code information, dated or in force between February 1 of the previous year and February 1 of the current year, from ONE or more documents from EACH of the three groups outlined below:**

GROUP 1	GROUP 2	GROUP 3
<p>CHOOSE AT LEAST ONE OF THE FOLLOWING:</p> <ul style="list-style-type: none"><input type="checkbox"/> Driver's license<input type="checkbox"/> School records<input type="checkbox"/> Vehicle records (e.g. registration, lease, etc.)<input type="checkbox"/> Employment records<input type="checkbox"/> Insurance documents	<p>CHOOSE AT LEAST ONE OF THE FOLLOWING:</p> <ul style="list-style-type: none"><input type="checkbox"/> Welfare/child care records<input type="checkbox"/> Federal records (e.g. federal tax, social security, etc.)<input type="checkbox"/> State records<input type="checkbox"/> Local (municipal) records<input type="checkbox"/> Support payment records<input type="checkbox"/> Homeowner or tenant records<input type="checkbox"/> Military records	<p>CHOOSE AT LEAST ONE OF THE FOLLOWING:</p> <ul style="list-style-type: none"><input type="checkbox"/> Voter's registration<input type="checkbox"/> Utility bills (e.g. gas, electric, phone, heating, etc.)<input type="checkbox"/> Financial records (loan, credit, investments, etc.)<input type="checkbox"/> Medical records<input type="checkbox"/> Internet, cable, or satellite records

NOTE: Example - Three documents from the same Group (utility bill, cable bill, and bank statement) constitute only ONE document. Any documents submitted as proof of residence must show customary usage or consumption to demonstrate bona fide continuous habitation as determined by Little League Baseball, Incorporated in its discretion.

PROOF of AGE Required - ***A copy of the original Birth Certificate is required

T-Ball - \$65

Single Player - \$105

2 Players - \$200

Family (3 or more) - \$290

***All price totals include \$30 for Raffle Tickets (6 tickets in a pack \$5 per ticket)*

Families with 3 or more players will only be charged for 3 Raffle Tickets

REGISTRATION DATES

February 2nd - 10am to 2pm at Silvis Police Station Hospital Rd

February 16th - 10am to 2pm at Silvis Police Station Hospital Rd

March 2nd - 10am to 2pm at EM Union Hall, 630 19th St.

Questions: Please contact Marcus Nache @ 309-558-8714, Message us on Facebook, email us at silvislittleleague55@gmail.com or send to PO Box 16, Silvis IL 61282



Silvis & United (EM) Little League® Player Registration Form

Player Information

Player Name: _____ Birthdate (mm/xx/yyyy): _____
 Address: _____ Gender: Male Female
 Address 2 (if applicable): _____ League Age: _____ League Fee: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Email: _____
 My child will tryout for: Baseball Softball **Player Shirt Size** _____

Parent/Guardian Information

Parent/Guardian #1

Name: _____
 Phone: _____
 Email: _____
 Occupation: _____
 Volunteer? Yes No
 If yes, fill out "Volunteer Application"

Parent/Guardian #2

Name: _____
 Phone: _____
 Email: _____
 Occupation: _____
 Volunteer? Yes No
 If yes, fill out "Volunteer Application"

Medical Information

Emergency contact: _____ Insurance carrier: _____
 Relationship to player: _____ Phone: _____
 Phone: _____ Policy: _____

Terms and Conditions

- 1/We, the parents/guardians of the above-named candidate for a position on a Little League team, hereby give my/our approval to participate in any and all Little League activities, including transportation to and from the activities.
- 1/We know that participation in baseball or softball 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 any injury to my/our child whether the result of negligence or for any other cause.
- If applicable, 1/We agree to return upon request the uniform and other equipment issued to my/our child in as good conditions as when received except for normal wear and tear.
- 1/We agree to provide proof of legal residence or school enrollment (as defined by Little League Baseball, Incorporated at LittleLeague.org/residence) and age. 1/We understand that our child (candidate) must be eligible under the residence/school attendance and age regulations of Little League Baseball, Incorporated, to participate in this Local League, and that if any controversy arises regarding residence/school attendance and/or age, the decision of the Little League International Charter Committee in Williamsport, Pennsylvania shall be final and binding. 1/We further understand that if any participant on a Little League team does not qualify for participation in the league based on residence (as defined by Little League Baseball, Incorporated) and/or age, such participant and/or team on which he/she participates be found ineligible, and forfeit(s) and/or suspension of Tournament privileges may be decreed by action of the Little League International Charter Committee or Little League International Tournament Committee.
- 1/We agree that our child (candidate) may be required to try out for a team. If such does not attend at least 50 percent of the tryouts, local Board-of-Directors' approval is required for such candidate to be placed on a team.
- If applicable, 1/We understand that our child (candidate) may be chosen at any time to play on a Major Division team if he or she is of the correct age for such division as determined by the local league and Little League Baseball. Declining to move up to such Major Division team will result in forfeiture of eligibility for the Major Division for the current season, and may be subject to further restrictions by the local league.
- 1/We will furnish a certified birth certificate of the above-named candidate to League Officials.
- 1/We understand that my information as the parent or guardian of such above-named candidate is sent by the local league to Little League International each year. Such use of information by Little League International can be found here: www.LittleLeague.org/privacypolicy. You may opt-out of communications from Little League International at any time.

Signature: _____ Date: _____

Internal Use Only:

Birth Certificate: Yes No Waiver Needed? Yes No
 Medical Release Form Yes No Level Assigned: _____
 Proof of Residency *or* Yes No Team Name: _____
 School Enrollment



Little League® Baseball and Softball School Enrollment Form



The District and the local league will maintain this form and supporting documentation in their files. Completion of this form is only required ONCE during a participant's career, unless the school enrollment changes. A II(d) would then be required.

To Be Filled Out By Parent/Legal Guardian

Date: _____

League Name: _____

League ID#: _____

Player/Student Name: _____

Date of Birth: _____

Division: (Check One)	<input type="checkbox"/> Baseball	Level: (Check One)	<input type="checkbox"/> Tee Ball	<input type="checkbox"/> LL (Majors)	<input type="checkbox"/> Junior
	<input type="checkbox"/> Softball		<input type="checkbox"/> Minors	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Senior

Parent/Guardian Address: _____
(Street) (City/State) (Zip)

(Print Name of Parent/Legal Guardian)

(Signature of Parent/Legal Guardian)

(Date)

To be filled out by School Administrator, Principal, or Vice Principal

I, _____ of _____ School, located at
(Print Name) (Print School Name)

_____, hereby verify that
(Physical Address) (School Phone Number)

_____ has enrolled and is attending the above named school for the _____
(Print Student Name) (Year)

academic year prior to October 1st, of the current academic year.

This student has been enrolled as of _____
(Date)

(Signature)

(Date)

Title (School Administrator, Principal, or Vice Principal)

If the Charter/Tournament Committee subsequently finds that the information submitted as acceptable documentation regarding school enrollment/attendance now shows that the previously submitted information/documentation was falsified, misrepresented or insufficient, then Little League Baseball, Incorporated reserves the right to impose sanctions and/or penalties on all appropriate parties, including but not limited to players, coaches, league officials, and/or the league which could result in suspension and/or terminations with Little League Baseball, Incorporated.