



Calgary Foothills Little League 2015 Registration

Player Name: _____

Birthdate: _____ Previous Division/Team: _____

Age as of Apr 30, 2015 _____ Age as of Dec 31, 2015: _____

Address: _____

Postal Code: _____ Home Phone: _____

Primary e-mail address: _____

Alternate e-mail address (if applicable): _____

1st Parent/Guardian: _____

Home Phone: _____ Cell Phone: _____

2nd Parent/Guardian: _____

Home Phone: _____ Cell Phone: _____

All players must live within our boundaries in order to register. (see the website for more information). If you do not live within the boundaries but go to school within them, we will require a separate form to be completed and returned to us. Do you require this form?

YES

NO

PLEASE SELECT DIVISION:

- | | | |
|---|-------|--|
| <input type="checkbox"/> Instructional 1 | \$125 | Birth year 2009-2010 |
| <input type="checkbox"/> Instructional 2 | \$125 | Birth year 2007-2008 |
| <input type="checkbox"/> Minors | \$155 | Birth year 2005-2006 or 10yrs as of April 30, 2015 |
| <input type="checkbox"/> Nationals/Majors | \$155 | 11 or 12 years of age as of April 30, 2015 |
| <input type="checkbox"/> Juniors | \$175 | 13 or 14 years of age as of April 30, 2015 |
| <input type="checkbox"/> Seniors | \$175 | 15 or 16 years of age as of April 30, 2015 |
| <input type="checkbox"/> Big League | \$175 | 17 or 18 years of age as of April 30, 2015 |

Any Instructional or Minors players who would like to be considered for a Division other than that determined by age, please indicate: _____

Please make all cheques payable to Foothills Little League

VOLUNTEER OPPORTUNITIES

Foothills Little League is dependent on volunteers in order to be successful. This year we require help in the following positions. Please check off any positions you are interested in:

- | | |
|---|---|
| <input type="checkbox"/> Board of Directors | <input type="checkbox"/> League Uniform Assistant |
| <input type="checkbox"/> Division Coordinator | <input type="checkbox"/> League Equipment Assistant |
| <input type="checkbox"/> Coach | <input type="checkbox"/> Casino Coordinator |
| <input type="checkbox"/> Assistant Coach | <input type="checkbox"/> Casino Volunteer |
| <input type="checkbox"/> Diamond Prep/Maintenance | <input type="checkbox"/> Picture Day Coordinator |
| <input type="checkbox"/> Team Manager | <input type="checkbox"/> Ceremonies Volunteer |
| <input type="checkbox"/> Safety Coordinator | |

HOW DID YOU HEAR ABOUT FOOTHILLS LITTLE LEAGUE?

- | | | |
|---|----------------------------------|---|
| <input type="checkbox"/> Road Signs | <input type="checkbox"/> Website | <input type="checkbox"/> Existing League Member |
| <input type="checkbox"/> Community Newsletter | <input type="checkbox"/> Posters | <input type="checkbox"/> Other: _____ |

EMERGENCY CONTACT

Name: _____ Phone: _____

PARENT/GUARDIAN CONSENT/RELEASE

I/We, the parent(s)/guardian(s) of the above named registrant, hereby give my/our approval to his/her participation in any and all of the activities of the Little League during the current season. I/We assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities; I/We do further hereby release, absolve, indemnify and hold harmless the FOOTHILLS LITTLE LEAGUE, sponsors and supervisors, any or all of them. In the case of injury to the registrant, I/We hereby waive all claims against the organizers, the sponsors or any of the supervisors appointed by them. I/We likewise waive, to the extent not covered by liability insurance, any claim against any person transporting the registrant to or from activities. I/We will furnish a certified birth certificate and Alberta Health Care (i.e. photocopy) as proof of the named candidate upon request of League Officials.

Signature of Parent/Guardian

Date